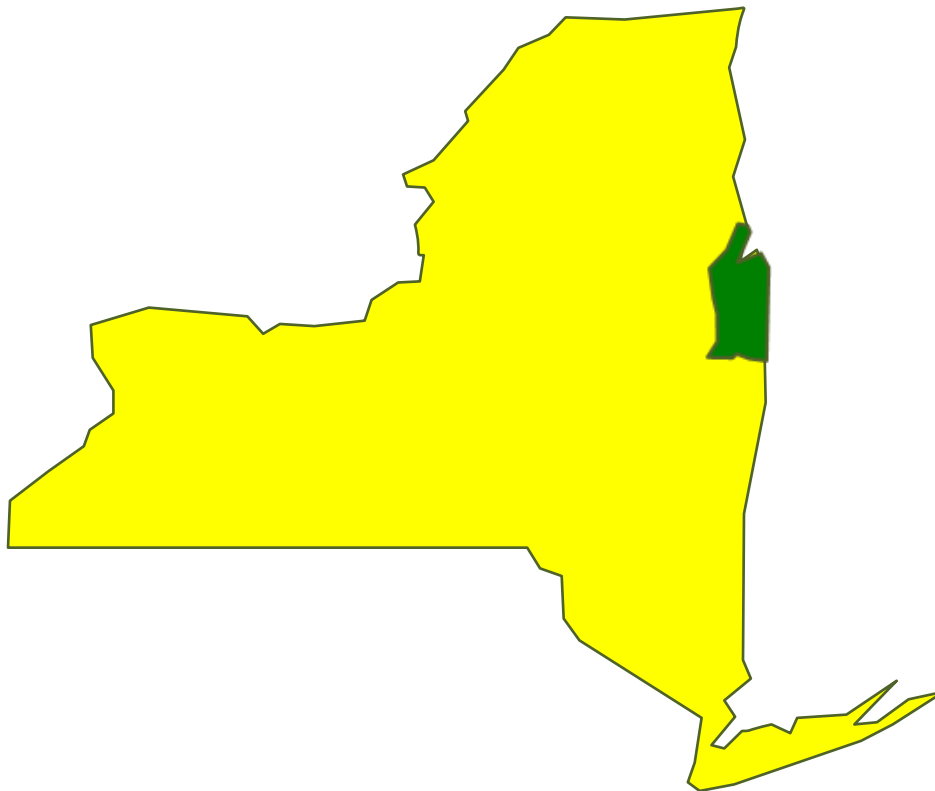


# Community Health Needs Assessment

2013



**Washington County, New York**



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## **Introduction**

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize the healthcare challenges currently faced by the residents of Washington County. The findings in this CHNA result from a year-long process of collecting and analyzing data and consulting with stakeholders throughout the community and the region. The results of this CHNA are intended to help members of the community, especially healthcare providers, work together to provide programs and services targeted to improve the overall health and wellbeing of all residents of Washington County.

Working within the framework provided by New York State's Prevention Agenda, the Adirondack Health Institute and Washington County Public Health collaborated in the development of this CHNA. Additionally, Washington County Public Health participated in regional health assessment and planning efforts conducted by the Adirondack Rural Health Network.

## **The Adirondack Rural Health Network**

The Adirondack Rural Health Network is a program of the Adirondack Health Institute, Inc. (AHI). AHI is a 501c3 not-for-profit organization that is licensed as an Article 28 Central Service Facility. AHI is a joint venture of Adirondack Health (Adirondack Medical Center), Community Providers, Inc. (Champlain Valley Physicians Hospital Medical Center) and Hudson Headwaters Health Network. The mission of AHI is to promote, sponsor, foster and deliver programs, activities and services which support the provision of comprehensive health care services to the people residing in the Adirondack region.

Established in 1992 through a New York State Department of Health Rural Health Development Grant, the Adirondack Rural Health Network (ARHN) is a regional multi-stakeholder coalition that conducts community health planning activities by providing the forum for local public health services, community health centers, hospitals, community mental health programs, emergency medical services, and other community-based organizations to assess regional needs and the effectiveness of the rural health care delivery system. ARHN plans, facilitates and coordinates many different activities required for successful transformation of the health care system including: conducting community health assessments, provider education and training, patient and family engagement, identifying and implementing best practices to optimize health care quality, and publishing regional and county-specific data and reports at [www.arhn.org](http://www.arhn.org).

Since 2002, the ARHN has been recognized as the leading sponsor of formal health planning for Essex, Fulton, Hamilton, Saratoga, Warren and Washington Counties. During 2011- 2012 the ARHN expanded its regional community health planning efforts to include Clinton and Franklin counties, and currently includes critical stakeholders from all eight counties in the regional planning process. The ARHN provides a neutral, trusted mechanism through which key stakeholders throughout the region can plan, facilitate and coordinate the activities necessary to

complete their required community health planning documents, and strategize on a regional level to address common health care concerns.

The ARHN provides guidance and technical assistance to the Community Health Planning Committee (CHPC), a regional forum for hospitals, county health departments and community partners, who provide oversight of planning and assessment activities. The group is further comprised of subcommittees developed to address areas specific to hospital, public health and data-specific requirements. Regular meetings of each subcommittee and the full CHPC have resulted in a systematic approach to community health planning and the development of regional and local strategies to address health care priorities.

### **New York State's Prevention Agenda 2013 - 2017**

*The Prevention Agenda 2013-17* is New York State's Health Improvement Plan for 2013 through 2017, developed by the New York State Public Health and Health Planning Council (PHHPC) at the request of the Department of Health, in partnership with more than 140 organizations across the state. This plan involves a unique mix of organizations including local health departments, health care providers, health plans, community based organizations, advocacy groups, academia, employers as well as state agencies, schools, and businesses whose activities can influence the health of individuals and communities and address health disparities. This unprecedented collaboration informs a five-year plan designed to demonstrate how communities across the state can work together to improve the health and quality of life for all New Yorkers. Recent natural disasters in New York State that have had an impact on health and wellbeing re-emphasize the need for such a roadmap.

In addition, the *Prevention Agenda* serves as a guide to local health departments as they work with their community to develop mandated Community Health Assessments and to hospitals as they develop mandated Community Service Plans and Community Health Needs Assessments required by the Affordable Care Act over the coming year. *The Prevention Agenda* vision is New York as the Healthiest State in the Nation. The plan features five priority areas:

- Prevent chronic disease
- Promote healthy and safe environments
- Promote healthy women, infants and children
- Promote mental health and prevent substance abuse
- Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases and healthcare-associated Infections

*The Prevention Agenda* establishes goals for each priority area and defines indicators to measure progress toward achieving these goals, including reductions in health disparities among racial, ethnic, and socioeconomic groups and persons with disabilities.<sup>1</sup>

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<sup>1</sup> (New York State Prevention Agenda 2013-2017)

## **Health Needs Assessment Process**

The process of identifying the important healthcare needs of the residents of Washington County involved both data analysis and consultation with key members of the community. The data was collected from multiple sources including publically available health indicator data, data collected from a survey conducted by the Adirondack Rural Health Network and a survey / focus group conducted by Washington County Public Health.

The health indicator data is collected and published by New York State and contains over 300 different health indicators. Since 2003, The Adirondack Rural Health Network has been compiling this data for the region and producing reports to inform healthcare planning on a regional basis. Last year, ARHN undertook a project to systemize this data into a relational database to provide improved access and analysis. The results of this analysis provide a statistical assessment of the health status for the region and each county therein.

In December 2012 and January 2013, the Adirondack Regional Health Network (ARHN) conducted a survey of selected stakeholders representing health care and service-providing agencies within an eight-county region. The results of the survey are intended to provide an overview of regional needs and priorities, to inform future planning and the development of a regional health care agenda. The survey results were presented at both the county and regional levels.

Using county specific data received from the Adirondack Rural Health Network (ARHN) survey conducted December 2012 and January 2013, Washington County Public Health hosted three community engagement meetings to assess the health status of Washington County, determine 8 areas of most concern, and to develop action plans for two (2) priority areas within the 2013-2017 New York State Prevention Agenda.

The two (2) priority areas and specific focus areas are listed below:

- **Chronic Disease:**
  - o Reducing Obesity in Children and Adults
  - o Reduce Illness, Disability, Diagnosis, and Deaths Associated with Tobacco and Second Hand Smoke Exposure
- **Promote Mental Health and Prevent Substance Abuse:**
  - o Prevent Substance Abuse and Mental Emotional Behaviors

## **Geography**

Located in the northeastern part of New York State, Washington County is nearly equidistant to New York City, Montreal and Boston. Washington County has an approximate population of 63,216 residents and has had a steady population growth for several decades. The county is approximately 82 miles long and 20 miles wide resulting in an area of 837 square miles with population density of 76 persons per square mile. Nestled within its borders are 17 towns and 9 villages and 10% of the US and Canadian population lives within three hundred miles of the county. Washington County is part of the Glens Falls Metropolitan Statistical Area and is approximately fifty miles from Albany, the New York State Capital.

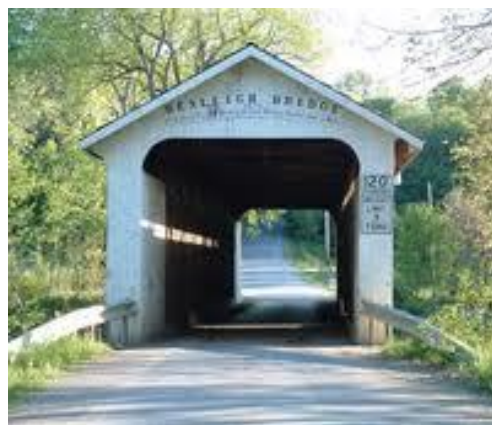


Washington County is a scenic area, with its northern landscape located in the Adirondack Park. These areas are primarily mountainous and forested. Rolling hills and flatlands characterize the eastern and southern landscapes of the county and were traditionally developed into farmlands.

## **Infrastructure and Services**

### ***History and Tourist Attractions***

Washington County is bordered on the west by Lake George and the Hudson River, to the north by Essex County (site of the 1932 and 1980 Winter Olympics), to the east by the State of Vermont and to the south by New York's Capital District. Residents and tourists take advantage of numerous recreational opportunities, including downhill and cross country skiing, biking on Class I trails, boating on Lake George, Lake Champlain, the Hudson River and the Champlain Canal, fishing the Battenkill and Mettawee Rivers and Halfway Brook for trout, hiking State Forest Preserve lands, or golfing on various courses.<sup>2</sup>



### ***Population and Demographics-***

Washington County's population is just over 63,000, making it the fourth most populous county in the Adirondack Rural Health Network (ARHN) region and the 41<sup>st</sup> most populous in the state.

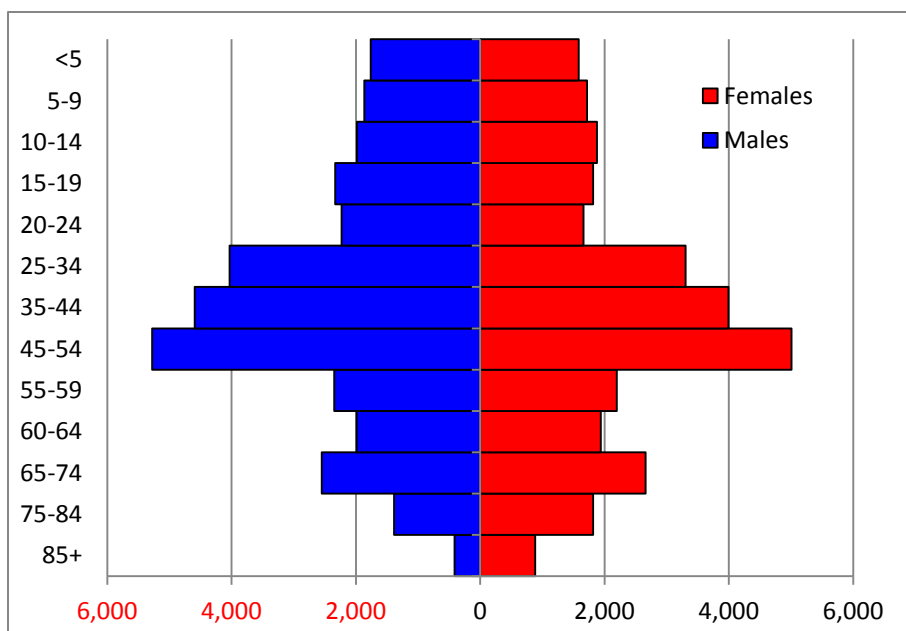
<sup>2</sup> (Washington County Local Development Corporation)

The population is neither racially nor ethnically diverse; over 93% of the population is White, Non-Hispanic, 2.8% is Black/African American, Non-Hispanic, and 2.3% is Hispanic/Latino. More than 15 % of the population in Washington County is 65 years of age and older, slightly higher than in the ARHN region (14.6%) and Upstate New York (14.3%).

Washington County is comprised of a predominately white English speaking population. Many residents rely on the county's rich natural resources and agriculture. Some county residents commute outside of

county borders traveling an average of 26.7 miles to their employer. The percentage of residents living below poverty level is 11.9% and the 18-34 year old age group make up the greatest percentage uninsured.

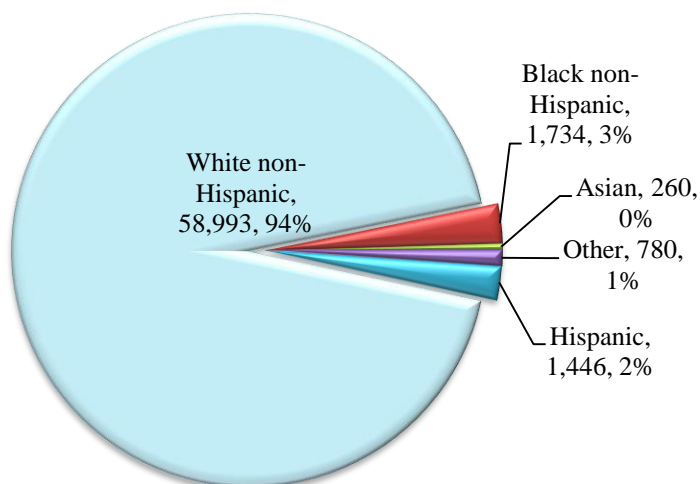
**Figure 3: Population Distribution by Age and Gender, Washington County, 2010**



Source: American Fact Finder Table P12: Sex by Age

**Figure 4: Population Distribution by Race, Washington County, 2010**

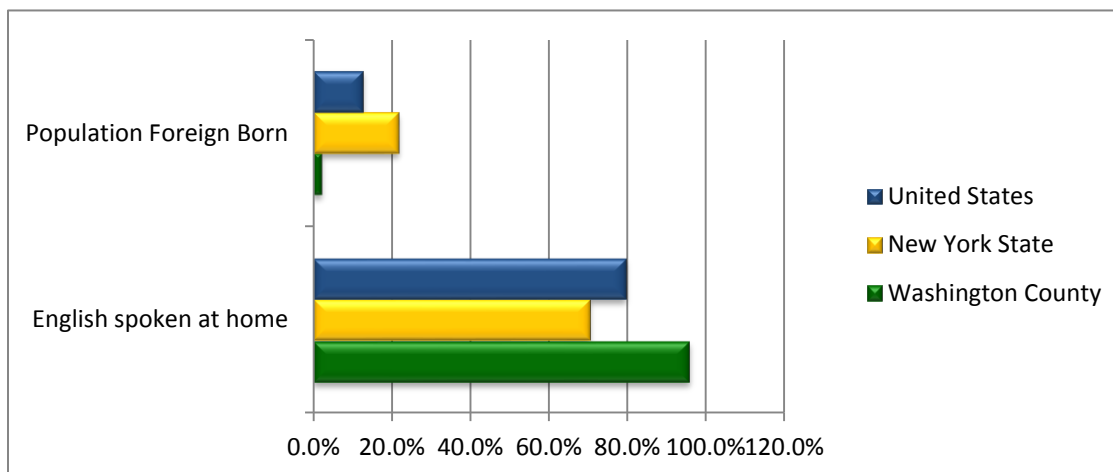
Washington County's population is neither racially nor ethnically diverse. Over 93% of its population is White-Non Hispanic.





Washington County residents that are foreign born make up 2.2% of the population. This rate is much lower than New York State (21.8%) and nationally (12.8%). Residences that speak English as a primary language account for 95.8% of homes within the county and is higher than New York State (70.5%) and national rates (79.7%).

**Figure 6:**  
**Population Characteristics, Washington County, New York State and the United States**



Source: American FactFinder: Table DP02

### ***Quality of Life***

Geographic diversity is a valuable asset in Washington County. Whether you prefer lakeside, rural village, traditional farming or mountainous living, Washington County has it all. Residents of Washington County live simply primarily due to the size of the county and the many towns and villages with miles in between. They take great pride in Washington County heritage, recreational opportunities, scenic country sides and small town living. The people of Washington County are stable, productive, and have strong roots.

### ***The Economy and Employment Sectors***

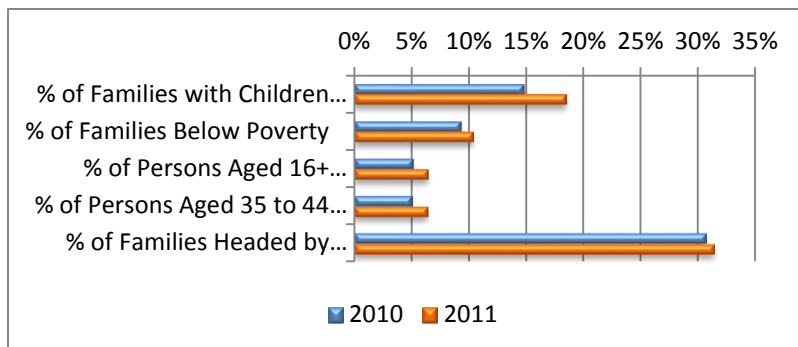
Beginning in the 1700's, Washington County's economy was dependent upon its natural resources, with agricultural products, timber, lime and slate being the primary exports. The construction of saw and grist mills, kilns and foundries was stimulated first by the historic trading routes and later by the construction of the Champlain Canal and the railroad in the 1800's.

Today, Washington County is one of New York State's leading dairy counties, with maple syrup and apples being important cash crops. The economic importance of agriculture in the County is over \$200 million annually, which includes numerous ancillary businesses. The County is also home to manufacturers of medical instruments, paper making machinery, paper products,

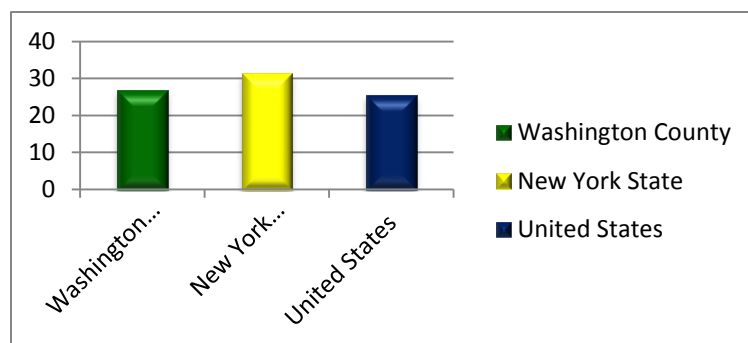
furniture and electronic components. Numerous slate quarries are in the northeastern part of the County (known as the Slate Capital of the World), yielding the world's only source of red slate.<sup>3</sup>

**Figure 5:**  
**Income and Poverty, Washington County, 2010-2011**

More than 62% of the population ages 16 and older is in the Washington County workforce. In 2011, Washington County had an unemployment rate of 7.6%, lower than the rates in both the ARHN region (8.1%) and Upstate New York (7.7%).<sup>4</sup>

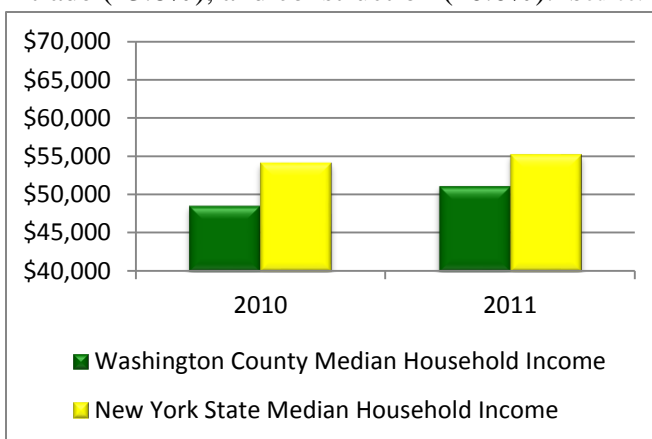


Source: American Fact Finder



Many residents travel an average 27 minutes for employment and education. Most residents are employed in private for profit and not-for-profit jobs. Travel is shorter in comparison to New York State (31 minutes) and the United States (25 minutes). The largest employment sector in Washington

County is manufacturing (15.8%), followed by health care and social assistance (14.7%), retail trade (13.8%), and construction (10.0%). Source: American Fact Finder



### ***Income and Poverty***

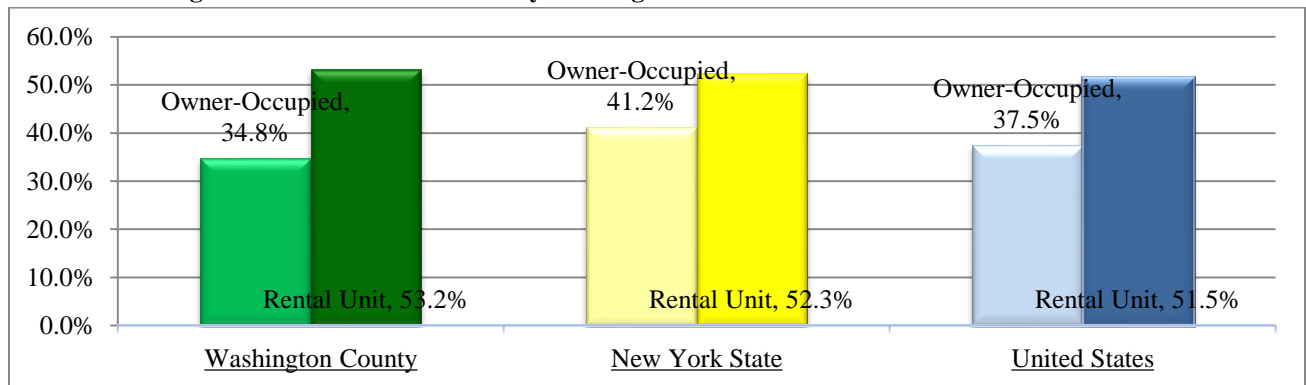
Mean household income in the County is \$59,259 and per capita income is \$23,252, both lower than the state-wide figures of \$82,699 and \$31,796 respectively.<sup>5</sup> A higher percentage of individuals in Washington County live below the Federal Poverty Level (11.9%) than in the ARHN region or Upstate New York as a whole (both 10.9%). The percentage of individuals receiving Medicaid in Washington County (18.1%) is also higher

than the ARHN region (15.9%) and Upstate New York (16.3%). Source: American Fact Finder

<sup>3</sup> (Washington County Local Development Corporation)

<sup>4</sup> (American Community Survey, 2007-2011)

**Figure 8:**  
**Percentage of Households with Monthly Housing Costs at least 30% of Total Household Income**



Source: American FactFinder: Table DP05

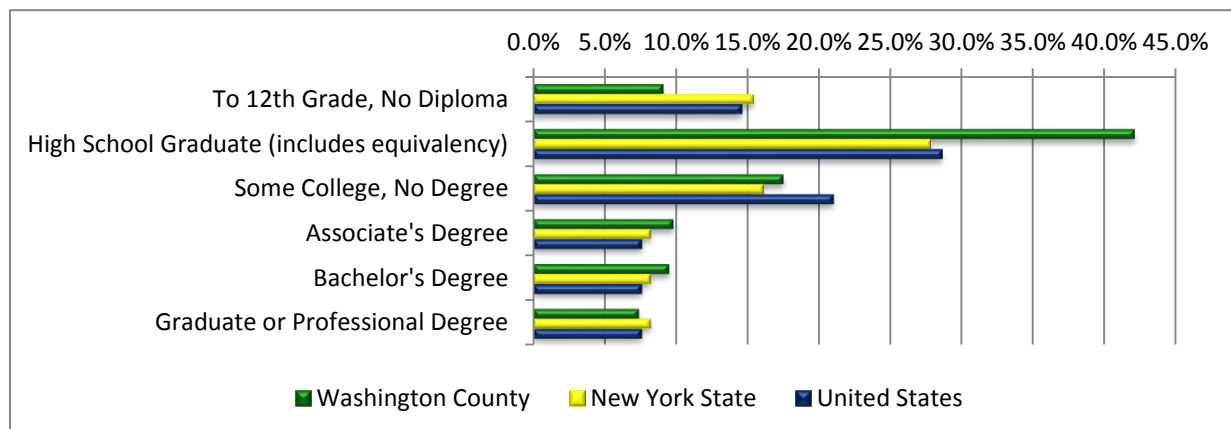
The percentage of County households with monthly housing cost at least 30% of the total household income was less than the NYS rate for owner occupied dwelling and only slightly less than the national rate. The greatest economic burden is on the renter in Washington County who spends a higher percentage of their monthly income on housing cost than those who own their own home.

### ***Education***

There are eleven (11) school districts in Washington County, with a total enrollment of nearly 9,300. Slightly more than 29% of the enrolled students receive free or reduced lunches, and the high school dropout rate is 1.6%; both numbers are comparable to their respective rates in the ARHN region (29.3% free and reduced lunch and 1.7% dropout rate) and Upstate New York (31.6% free and reduced lunch and 1.7% dropout rate). There are 10.9 students per teacher, lower than the ARHN regional rate of 11.6 and the Upstate New York rate of 12.2. There are two LPN education programs in Washington County. See Appendix: 14

The highest level of education completed by 42% of the population ages 25 and older is a high school diploma or GED, and an additional 27% have an Associate's, Bachelor's, or Graduate/Professional degree.

**Figure 7:**  
**Level of Education, Washington County, New York State and United States**

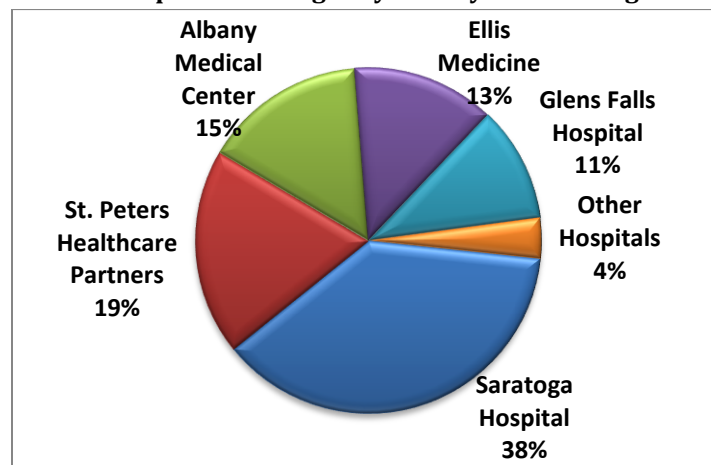


Source: American Fact Finder: DP02

## Health Care Facilities

Washington County does not have a hospital; it does have 4 nursing homes and 3 adults care facilities with a total of 528 and 102 beds respectively. There are newly 37 fulltime equivalent (FTE) primary care physicians practicing in Washington County, or 57.7 per 100,000 population, which is substantially lower than the rates of both the ARHN region (99.9) and Upstate New York (108.5). There are 664 registered nurses, 459, licensed practical nurses, and 35 physicians licensed in the county. *See Appendix: 13*

**Figure 2:**  
**2010-2011 Hospital Discharges by Facility for Washington County**

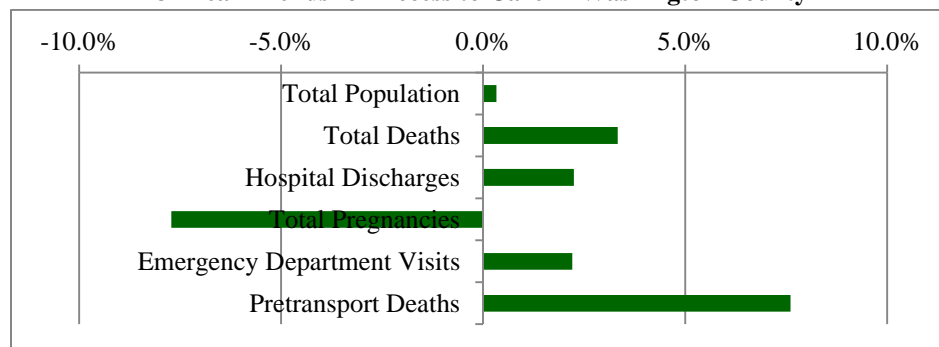


Source: SPARCS Data

## Healthcare Service Gaps

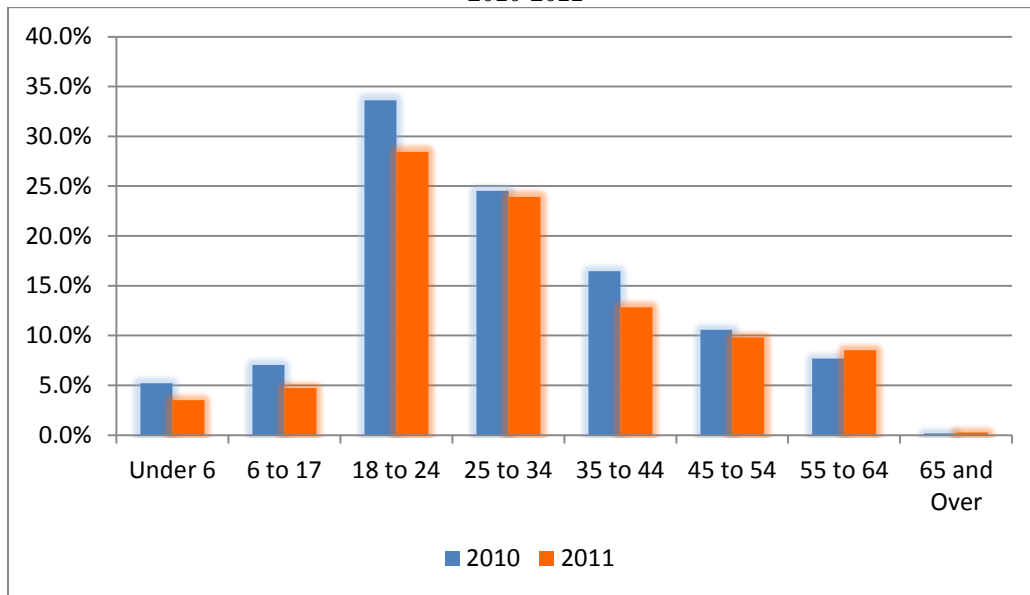
Like any healthcare system, Washington County's has gaps in service. Gaps identified in Washington County include: primary prevention care, health screenings, early detection and treatment of disease. Gaps in service may result due to residents having limited access to transportation and residents not seeking care due to deeming themselves "healthy" until the need for intervention is critical or causes death. Other gaps may result from the inability to maintain treatment plans as prescribed and the unfortunate inability to pay for care and prescriptions due to limited or no insurance and other assistance programming.

**Figure 10:**  
**3- Year Trends for Access to Care in Washington County**



Source: Robert Indicator Data, Washington County

**Figure 9:  
Change in Percentage of Population who were Uninsured by Gender & Age Group,  
2010-2011**



Source: American FactFinder

The number of uninsured residents in Washington County is decreasing from 2010-2011 in age categories with the exception of an increase in the 55-65 year old age group. This may reflect the lack of insurance coverage for the post retirement and pre-Medicare eligible population. Being uninsured virtually disappears once residents Medicare eligibility is reached.

### **Healthcare Challenges in Washington County**

Disparities refer to gaps in the quality of health and health care across racial, ethnic, sexual orientation and socioeconomic groups. The Health Resources and Services Administration define health disparities as "population-specific differences in the presence of disease, health outcomes, or access to health care."

Disparities identified in Washington County are children and those that are poor, mentally ill, elderly, and substance users. The common denominator for all identified disparities in Washington County is the economy and its effect on residents. The average household income is approximately \$50,000 which calls for many residents rely strongly on supplemental income programs. Poor socioeconomic status leads to poor health seeking behaviors, lack of engagement in wellness and preventive screenings and delayed engagement into medical care until a health problem becomes a crisis.

## **Prioritized Significant Health Needs in Washington County**

The 2013-2017 New York State Prevention Agenda is the blueprint for state and local action to improve the health of New Yorkers in five priority areas and to reduce health disparities for racial, ethnic, disability, socioeconomic and other groups who experience them. The five (5) priority areas that cause healthcare challenges in Washington County are outlined below.

- **Promote a Healthy and Safe Environment**

- ***Injuries, Violence and Occupational Health-***

- Areas of concern within this priority are falls, motor vehicle and speed related accidents, occupational exposures and injuries. Rates for emergency department visits and hospitalizations due the areas of concern rank worse in comparison to the 2017 Prevention Agenda Benchmark.

- ***Outdoor Air Quality-***

- Exposures to Unhealthy Ozone or Particulate Matter rates associated with this focus area meet and/or are better in comparison to the 2017 Prevention Agenda Benchmark deeming the quality of outdoor air in Washington County satisfactory.

- ***Built Environment-***

- Modes of transportation are very limited in rural Washington County in that it is worse in comparison to the 2017 Prevention Agenda Benchmark. One bus route operates only in a limited area of the most populous township.

- ***Water Quality***

- Many residents rely on wells for water supply instead of Community Water Systems. Well water limits residents access to Optimally Fluoridated Water which results in youth requiring fluoride supplements to ensure dental health and cary prevention.

- **Prevent Chronic Disease**

- ***Reduce Obesity in Children & Adults***

- Obesity rates in Washington County are significant in that 30% of adults are obese. This rate is higher than the Prevention Agenda benchmark of 23%. More than one and five school age children are obese and this rate is too higher than the Prevention Agenda benchmark of 16.7%

- ***Reduce Illness, Disability and Death Related to Tobacco Use & Secondhand Smoke***

- Washington County has a high incidence of tobacco use and use among youth is a developing trend. Hospitalizations due to smoking related illnesses such as Asthma and Lower Chronic Respiratory Disease are worse in comparison to the 2017 Prevention Agenda Benchmark.

- ***Increase Access to High Quality Chronic Disease Preventive Care & Management in both Clinical & Community Settings***

- Access to care is essential for healthy residents in Washington County, but barriers to accessing high quality healthcare are abundant. Such barriers include lack of services and programming available, transportation, awareness of existing services, income, disparity and geography.

- **Promote Healthy Women, Infants and Children**
  - ***Maternal & Infant Health-***  
Washington County has an extremely high obese population. With approximately 30% of the population identified as obese, the rate of women diagnosed with gestational Diabetes is worse in comparison to the 2017 benchmark.
  - ***Preconception & Reproductive Health***
    - Having adequate knowledge about one's reproductive health is essential for Washington County residents. Woman of childbearing age seeking late or no prenatal care, preventive care, and lack good nutrition and physical activity are of high prevalence within the county and supports ranking worse in comparison to the 2017 Prevention Agenda Benchmark. The ratio of preterm births for those with Medicaid and those without are worse in comparison to the 2017 Prevention Agenda Benchmark.
  - ***Child Health***
    - Dental health and untreated tooth decay pose concerns in that the County ranks worse in comparison to the 2017 Prevention Agenda Benchmark. Children screened for lead at 9 months, 18 months, and at 36 months rank worse in comparison to the 2017 Prevention Agenda Benchmark.
- **Prevent HIV/STDs, Vaccine Preventable Diseases & Healthcare-Associated Infections**
  - ***Human Immunodeficiency Virus***
    - Newly diagnosed HIV/AIDS in Washington County seem to be controlled but will remain.
  - ***Sexually Transmitted Diseases***
    - Sexually Transmitted Disease rates in Washington County area are present but are not deemed of significant need.
  - ***Vaccine Preventable Disease***
    - Children and adults receiving vaccinations in Washington County rank worse in comparison to the 2017 Prevention Agenda Benchmark.
  - ***Healthcare Associated Infections***
    - Data for the region reflects lower in comparison to the 2017 Prevention Agenda Benchmarks. Healthcare facilities that associated infections are being identified are penalized. Data that is reflecting lower than benchmarks show that appropriate measures are being implemented.
- **Substance Abuse and Other Mental, Emotional and Behavioral Disorders**
  - ***Prevent Substance Abuse and Other Mental, Emotional, and Behavioral Disorders***
    - Mental and behavior health disorders in Washington County are of great concern. Many disorders reflect stressors such as socioeconomic struggle and many results in self-inflicted injury and substance abuse related injury or deaths. Although services are in place to address substance abuse and mental, emotional, and behavioral disorders, getting those in need of services to access care continues to be difficult. Advocacy for those in need of intervention is also a challenge.

Using county specific data received from the Adirondack Rural Health Network (ARHN) survey conducted December 2012 and January 2013, Washington County Public Health hosted two community engagement meetings to assess the health status of Washington County, determine 8 areas of most concern, and to develop action plans for 2 priority areas with 3 focus areas within the 2013-2017 New York State Prevention Agenda. Public Health invited community stakeholders from numerous sectors within the county. The 14 of 62 in attendance represented Glens Falls Hospital, Cornell Cooperative Extension, Public Health, Tobacco Prevention, The ADRC/OFA, Sexual Trauma and Recovery, WIC, Council for Prevention, DSS, and the Adirondack Rural Health Network. Those invited, but missing at the table represented schools, government, and healthcare providers in Washington County.

The first of the two-community engagement meetings titled, “The Health of Washington County,” was held on July 17, 2013 at the Annex II building in Fort Edward from 10am-12pm. The purpose of this meeting was to educate community stakeholders on the current health of Washington County. This was accomplished by creating and presenting a power point presentation around the Adirondack rural Health Networks (ARHN) and Center for Human Services Research survey results. Additional resources were referred to and included regional survey results, Prevention Agenda website data, BRFSS Data, and the Council for Preventions Youth Survey results. At the end of the meeting, those in attendance were given instruction to continue reviewing county specific data using links that the facilitator would attach via email. The links would provide additional information for the attendees to prioritize 8 areas of concern that will be used in the next meetings process.

The second community engagement meeting titled, “Let’s Prioritize,” was held on July 24, 2013 at the Annex II building in Fort Edward from 10-1pm. The purpose of this meeting was to select eight health areas of concern in Washington County and discuss them using specific questions. The eight health areas were: Chronic Disease, Obesity, Mental Illness and Substance Abuse, Tobacco, Maternal Child Health, Access to Care, STD’s and HIV, and Healthy Safe Environments. Each area was subject to answering the following questions to promote discussion:

- I. Severity of the Issue
  - a. Percent of population affected
  - b. Is this an emerging issue?
- II. What does the community say?
  - a. Will buy in be easy or hard?
- III. Is funding available?
- IV. What is in place now and is it working?
  - a. If so, who is doing the work?
  - b. If not, who will do the work?
- V. Benefits if Priority?
  - a. Quality of life



- b. Impact health indicators
- c. Long or short term benefit

As discussion ended, the Dot Method of Prioritization process was implemented to prioritize the top three focus areas. Each community stakeholder was given a strip of dots and was asked to place dots on the focus area of most importance. The result of this process determined the top three health priority areas, made way for action plans to be developed, and will assist in moving New York closer to becoming the healthiest state.

Based on analysis of the available health data, community surveys, input from stakeholders and discussions at the regional and local levels, listed below are the 2 priority areas and 3 focus areas that will be addressed for the next 3 years in Washington County:

- **Chronic Disease:** Reducing Obesity in Children and Adults
- **Chronic Disease:** Reduce Illness, Disability, Diagnosis, and Deaths Associated with Tobacco and Second Hand Smoke Exposure
- **Promote Mental Health and Prevent Substance Abuse:** Prevent Substance Abuse and Mental Emotional Behaviors

## **Assets and Resources to Address Prioritized Significant Needs**

Assets and resources available to address and improve the health of Washington County residents vary within its borders. Although they vary, existing assets and resources available are vital to fostering health improvement in Washington County. Such assets and resources include:

- Glens Falls Hospital Health Centers
- Dental Services
- Land and Park Services
- Libraries
- Mental Health Services
- Rehabilitation Services
- Protective Service i.e.: fire and police
- Schools and Health Services within Districts
- Pharmacies
- Wellness Centers

Other assets and resources are specific to the 2013-2017 New York State Prevention Agenda and the prioritized areas of need in Washington County.

### **Chronic Disease: Prevent Child and Adult Obesity**

Obesity rates in Washington County are significant in that 30% of adults are obese. This rate is higher than the Prevention Agenda benchmark of 23%. More than one and five school age children are obese and this rate is too higher than the Prevention Agenda benchmark of 16.7%. The rate of diagnosed high blood pressure is nearly 30% which is higher than the New York State rate of 26%. Alarming, the rate of deaths associated with Diabetes (27.5) is significantly higher than the ARHN (17.8) and Upstate New York (17.7).

Obesity and overweight are the second leading cause of preventable death in the United States (US) and will soon overtake tobacco as the leading cause of death<sup>6</sup>. By the year 2050, obesity is predicted to shorten life expectancy in the US by two to five years.<sup>7</sup>

Obesity is a significant risk factor for many chronic diseases and conditions, which reduce the quality of life, including type-2 diabetes, asthma, high blood pressure and high cholesterol. Increasingly, these conditions are being seen in children and adolescents.<sup>8</sup>

New York ranks second highest among states for medical expenditures attributable to obesity. Expenditures totaled \$11.1 billion (in 2009 dollars); \$4 billion financed by Medicaid and \$2.7 billion financed by Medicare.<sup>9</sup> Preventing and controlling obesity has the potential to save hundreds of millions of dollars annually. Failing to win the battle against obesity will mean

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<sup>6</sup> (New York State Prevention Agenda 2013-2017)

<sup>7</sup> (DS)

<sup>8</sup> (Health)

<sup>9</sup> (Trogdon JF)

premature death and disability for an increasingly large segment of NYS residents. Without strong action to reverse the obesity epidemic, for the first time in our history, children are predicted to have a shorter lifespan than their parents.<sup>10</sup>

The causes of obesity in the US and NYS are complex, occurring at social, economic, environmental and individual levels. There is no single solution sufficient to turn the tide on this epidemic. Successful prevention efforts will require multiple strategies, such as national, State and local policies and environmental changes that promote and support more healthful eating and active living and that reach large numbers of children and adults. These strategies must be supported and implemented in multiple sectors, including government agencies, businesses, communities, schools, child care, health care and worksites, to make the easy choice also the healthy choice.

Obesity rates in Washington County are significant in that 30% of adults are obese. This rate is higher than the Prevention Agenda benchmark of 23%. More than one and five school age children are obese and this rate is too higher than the Prevention Agenda benchmark of 16.7%. The rate of diagnosed high blood pressure is nearly 30% which is higher than the New York State rate of 26%. Alarming, the rate of deaths associated with Diabetes (27.5) is significantly higher than the ARHN (17.8) and Upstate New York (17.7).

- Nutrition Services for assessment, planning and counseling through Glens Falls Hospital, Washington County Cornell Cooperative Extension, Office of the Aging/ADRC, and WIC
- Hospital inpatient nutrition counseling for disease and condition specific populations
- Home Health Management Programs
- Community Gardens
- Community Supported Agriculture or CSA's
- Farmers Market and WIC Coupon Collaboration
- Wellness Centers
- Bicycle and Pedestrian Trails
- Community Recreation Programs
- Parenting Classes
- Healthy Schools NY
- Creating Healthy Places
- Shared/Joint Use Agreements (i.e. mall and schools)
- Employer-Sponsored Wellness Programs
- Community Organized/School Teams/Leagues
- Pharmacies
- Glens Falls Hospital Health Centers

The data and services above show that obesity in children and adults is a highly significant and emerging issue in Washington County. The benefits of intervention are numerous and timely and will depend greatly on the audience that they are offered to. Although the communities are reachable, socioeconomic disparity and barriers that may cause difficulty include: cost and

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<sup>10</sup> (Olshansky SJ)

maintenance of behavior change, lack of motivation, access to follow up and physical activity, offering the best choices that may not be the easiest to attain, income supplement guidelines and marketing support.

### **Chronic Disease: Reduce Illness, Disability, Diagnosis, and Deaths Associated with Tobacco and Second Hand Smoke Exposure**

Tobacco addiction is the leading preventable cause of morbidity and mortality in New York State (NYS) and in the United States.<sup>11</sup> Cigarette use, alone, results in an estimated 440,000 deaths each year in the United States, and 25,000 deaths in NYS.<sup>12</sup> There are estimated to be 570,000 New Yorkers afflicted with serious disease directly attributable to their smoking. The list of illnesses caused by tobacco use is long and contains many of the most common causes of death. These include many forms of cancer, including lung and oral; heart disease; stroke; chronic obstructive pulmonary disease and other lung diseases.<sup>13</sup>

Although there have been substantial reductions in adult smoking in NYS, some tobacco use disparities have become more pronounced over the past decade. Smoking rates did not decline among low-socioeconomic status adults and adults with poor mental health.<sup>14</sup>

Nearly 24% of adults smoke in Washington County and this data higher than the percentages throughout the ARHN region (21.4%) and Upstate New York (18.5%). This data also show to be significantly higher than the Prevention Agenda Benchmark of (15.0%). Asthma related hospitalizations per 10,000 populations and for individual age groups in Washington County were all higher than the ARHN and Upstate New York rates. The rates of lung and bronchus deaths and cases, as well as chronic lower respiratory disease deaths and cases, were higher than the ARHN region and Upstate New York rates per 100,000 population.

Many public spaces in and around Washington County have instituted smoke free policies. Smoke-free worksites, schools, parks and playgrounds, and other community buildings and campuses are slowly receiving buy in but many barriers still reflect personal right and choice conflicts with policies. Consistent enforcement is very important.

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<sup>11</sup> (Services, Reducing the Consequences of Smoking: 25 Years of Progress)

<sup>12</sup> (Control)

<sup>13</sup> (Services, How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis of Smoking-Attributable Disease)

<sup>14</sup> (RTI)

Several services are provided to address tobacco and the results of its use. These include:

- American Cancer Society
- American Heart Association
- American Lung Association
- Glens Falls Hospital Smoking Cessation Program
- Southern Adirondack Tobacco Free Network
- Council for Prevention
- Community advocates and groups within the county
- Washington County Public Health collaborations and wellness programming
- Reality Check
- NYS Quit Line

The severity of this issue is high and continues to be an emerging issue, especially among youth. The communities are on board with intervention and policy, but healthy behavior change is dependent on the community. Funding for this focus area is available and the benefits are potentially significant.

### **Promote Mental Health and Prevent Substance Abuse: Prevent Substance Abuse and Mental Emotional Behaviors**

Increasing evidence indicates that promotion of positive aspects of mental health is an important approach to reducing MEB disorders and related problems. Many MEB disorders, such as substance abuse and depression, have lifelong effects that include high psychosocial and economic costs for people, their families, schools and communities. The financial costs nationally in terms of treatment services and lost productivity are estimated at \$247 billion annually. Beyond the financial costs, MEB disorders interfere with people's ability to accomplish developmental tasks, such as establishing healthy interpersonal relationships, succeeding in school, making their way into the workforce and staying optimally functional once there. Mental and physical health problems are interwoven. Improvements in mental health help improve individuals and populations' physical health.<sup>15</sup>

Substance abuse, depression and other MEB disorders hurt the health, public safety, welfare, education, and functioning of New York State residents. In addition to evidence substance abuse and other MEB disorders can be prevented, there is confirmation that early identification and adequate societal support can prevent and alleviate serious consequences such as death, poor functioning and chronic illness.<sup>16</sup>

County specific data shows that there is a significant need for interventions associated with substance abuse and mental emotional behaviors. The rates of age-adjusted suicides per 100,000 population (13.0) and of self-inflicted hospitalizations per 10,000 population (11.8) in

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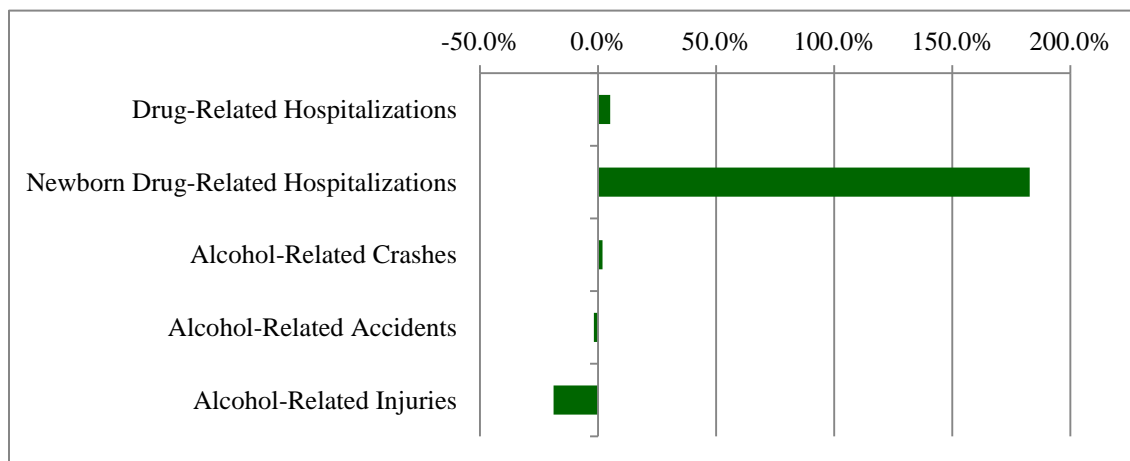
<sup>15</sup> (SheaP)

<sup>16</sup> (J. Eccles & JA Gootman (Eds) Committee on Community-Level Programs for Youth)

Washington County were higher than rates in the ARHN region (10.0, 9.1) and in Upstate New York (8.0, 6.1). The rate of self-inflicted hospitalizations for ages 15-19 per 10,000 population (30.2) were more than double the Upstate New York rate (11.0) and nearly 50% higher than the ARHN rate (20.3).

The severity of this focus area is high and an emerging issue for all. The benefits resulting in addressing this issue are numerous but there are many barriers to implementing prevention initiatives. Barriers include linking residents in need of behavioral health and substance abuse services to advocates and providers, providers not reaching out to the communities in need, and stigmas associated with the priority, and fears of liability within the communities, school systems and among parents.

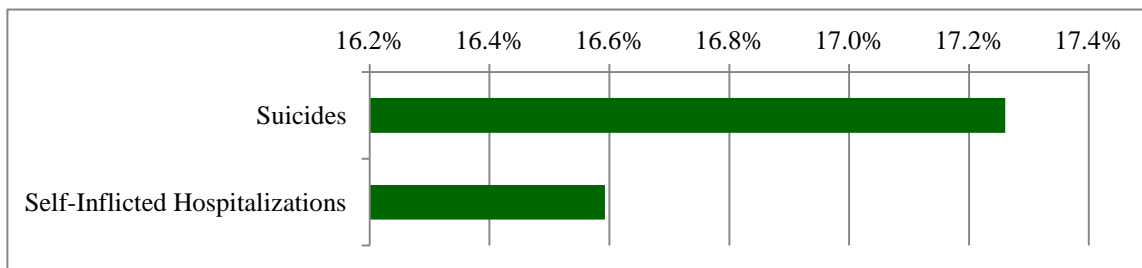
**Figure 16:  
3-year Trend for Injuries**



Source: Robert Martiniano, Center for Health Workforce Studies

The rates of alcohol related accidents, injuries and deaths per 100,000 population were worse than their respective upstate NY rates. In addition, the rates of children served in mental health outpatient settings per 100,000 population for 8 years and under and 9-17 year olds were substantially higher than their respective ARHN region and upstate NY rates.

**Figure 17:  
3-Year Trends for Mental Health**



Source: Robert Martiniano, Center for Health Workforce Studies

When looking at the trends for suicides and self- inflicted hospitalization, it is apparent that with the continued increases in incidence, intervention is strongly advised.

Several services are provided locally and regionally. They include:

**Behavioral Health Services:**

- Behavioral Health Services at Glens Falls Hospital
- Caleo Counseling Services, a Program of Warren-Washington
- The Capital District Psychiatric Center satellite clinics
- Office of Community Services for Warren & Washington Counties
  - Single Point of Entry/Single Point of Access
  - Dual Recovery Case Management
- Samaritan Counseling Services
- Warren/Washington Mental Health Association

**Substance Abuse Services:**

- 820 River Street, Inc.
- Baywood Center, a program of 820 River St., Inc.
- Center for Recover, a Program of Glens Falls Hospital
- Conifer Park Inc.
- Council for Prevention
- St. Peters Addiction Recovery Center (SPARC)

**Mental and Developmental Disability Services**

- ARC of Warren and Washington Counties
- Battenkill Community Services, Inc.
- Community, Work and Independence, Inc. (CWI)
- Glens Falls Independent Living Center
- Liberty House Foundation, Inc.

## **Figures, Tables and Appendixes:**

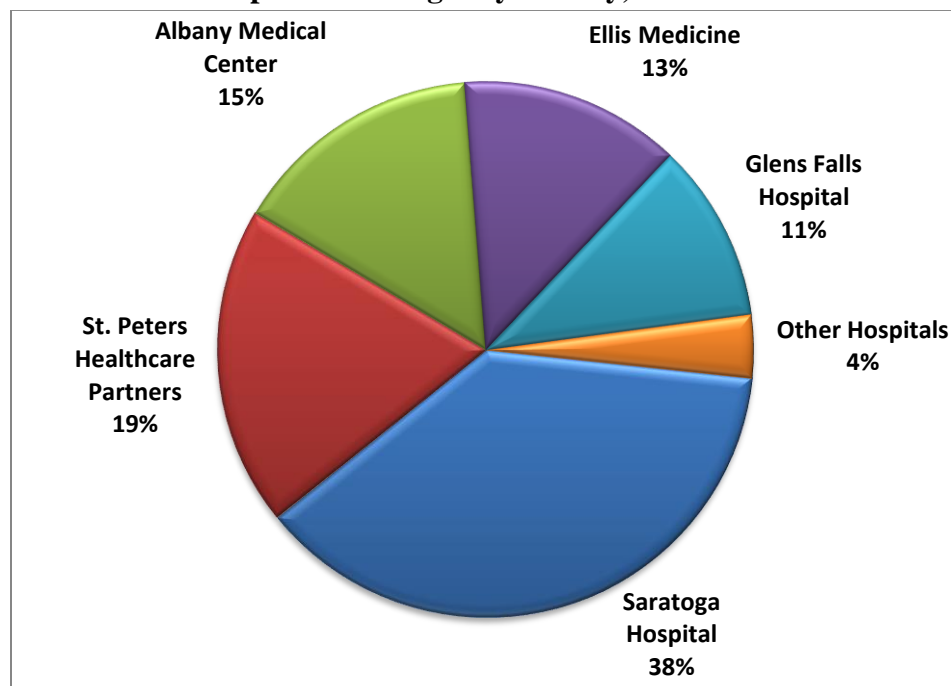


**Figure 1:**  
**Maps of New York State and Washington County**



Washington County is approximately 82 miles long and 20 miles wide resulting in an area of 837 square miles with population density of 76 persons per square mile. Nestled within its borders are 17 towns and 9 villages and 10% of the US and Canadian population lives within three hundred miles of the county.

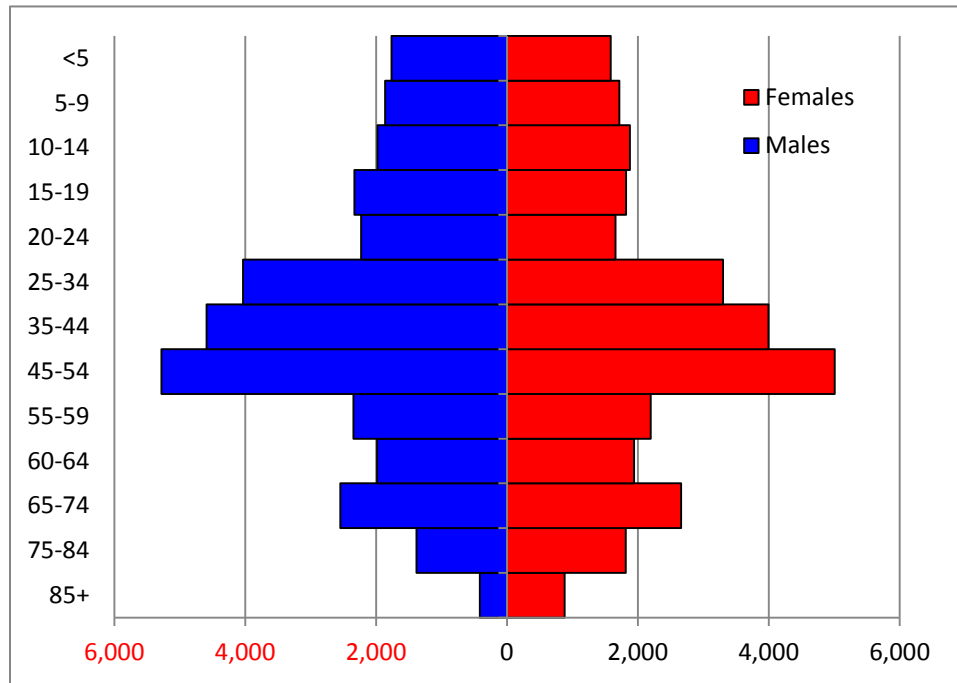
**Figure 2:**  
**Hospital Discharges by Facility, 2010-2011**



Source: SPARCS data

Glens Falls Hospital and Saratoga Hospital are the closest hospitals to Washington County in New York. Rutland Regional Medical Center and Western Vermont Medical Center are in Vermont and serve the Eastern border towns. Interestingly, almost 50% of hospital discharges come from the Capital District Region. This is the location of the regional tertiary care facility and specialty surgery and treatment facilities.

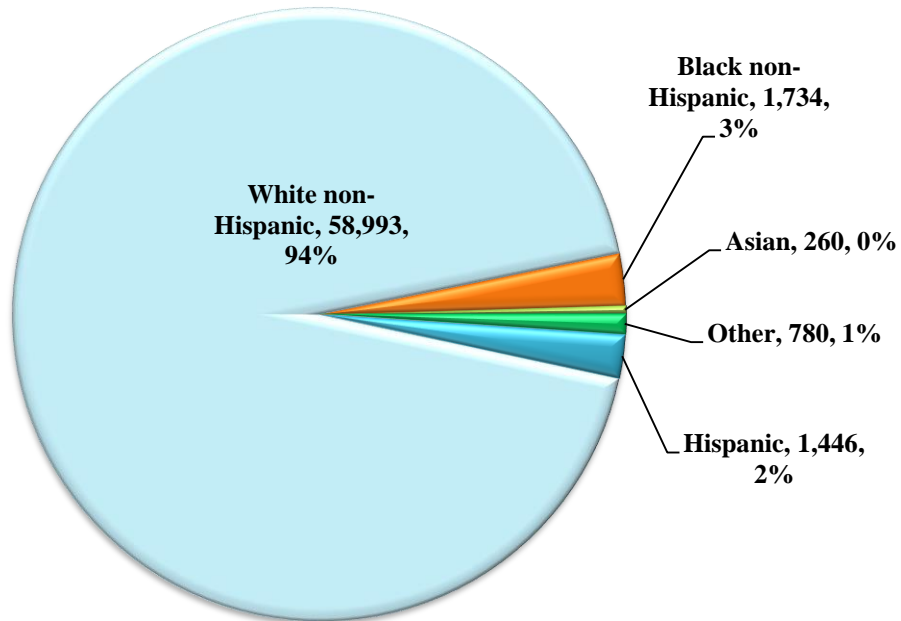
**Figure 3:**  
**Population Distribution by Age and Gender, Washington County, 2010**



Source: American FactFinder Table B23001

Washington County is the 41<sup>st</sup> most populous county in New York State. More than 15% of the county is 65 years old or older and is higher than the ARHN Region (14.6) and Upstate NY (14.3) rates in 2011. The median is 42 years old compared to 37 years old in 2000.

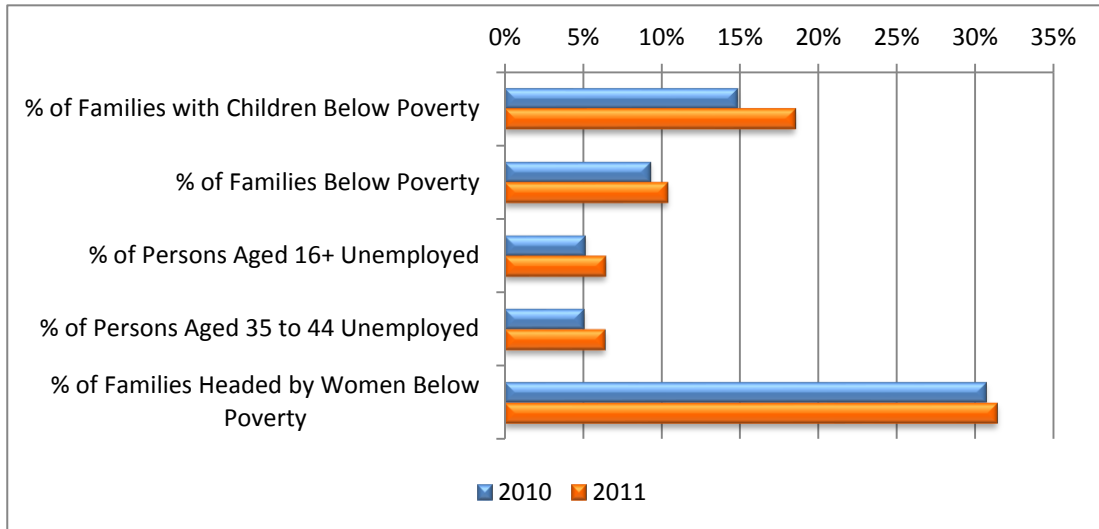
**Figure 4:**  
**Population Density by Race, Washington County, 2010-2011**



Source: 2010 Census Data

The 2010 census shows Washington County, New York's population as 63,216 and is an almost 1% increase from 2000 census data. The most populous racial and ethnic groups are white non-Hispanic in origin. Less than 7% of Washington County's population is of other origin.

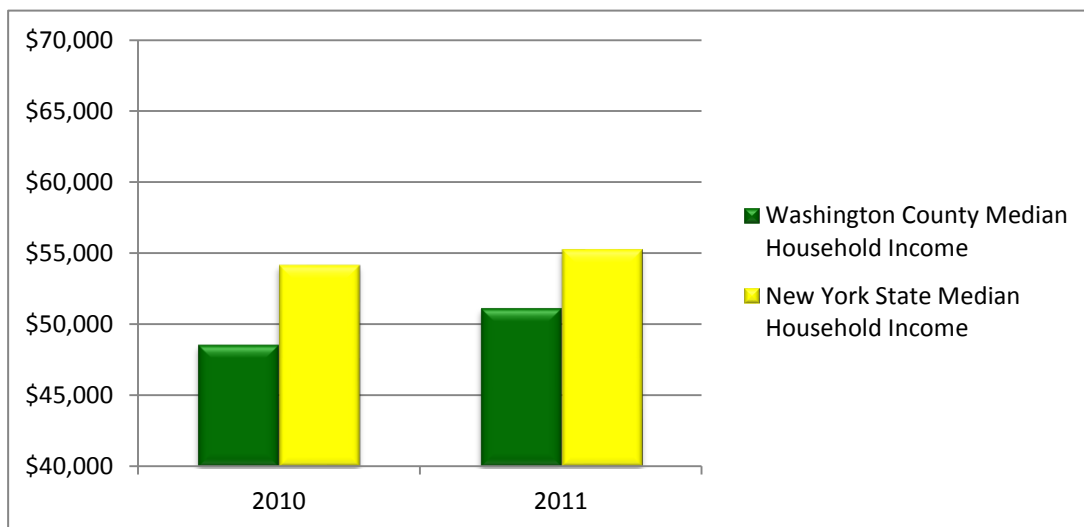
**Figure 5:  
Income and Poverty, Washington County, 2011**



Source: American FactFinder

There is a noted increase in the levels of poverty and unemployment. Nearly 10% of Washington County families are living below poverty level and 30% are headed by woman. Loss of work and benefits, especially healthcare insurance, is detrimental to an already vulnerable group.

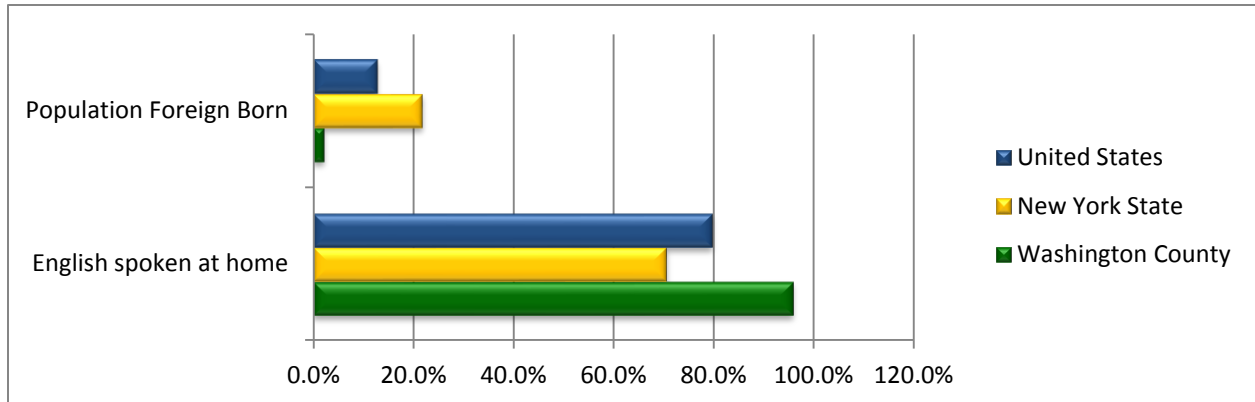
### **Median Household Income in Washington County**



Source: American Factfinder

Washington County household income median has increased slightly as did New York State, but the County is still lagging behind.

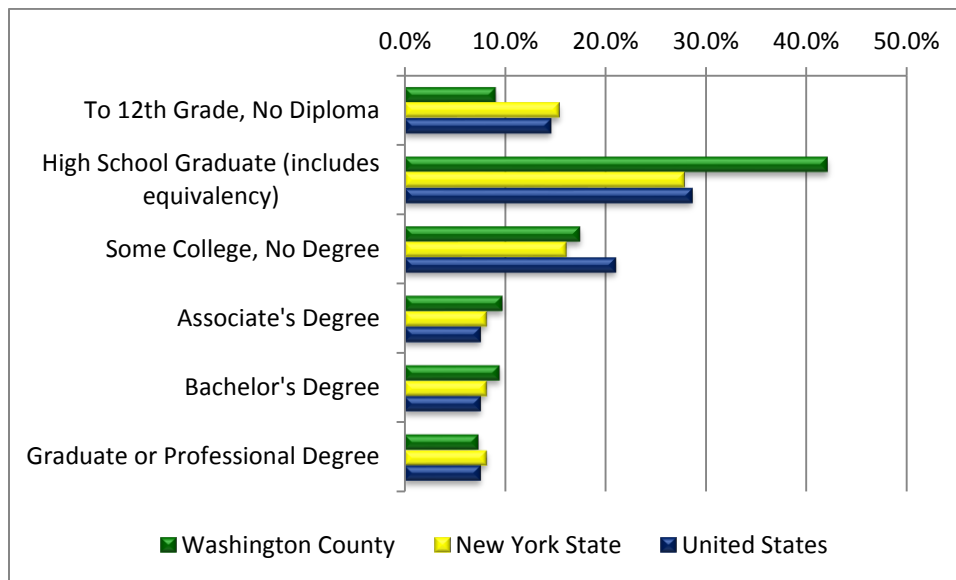
**Figure 6:**  
**Population Characteristics, Washington County, New York State, and United States**



Source: American FactFinder

Washington County has a very low % of foreign born residents than in New York State (22%). About 30% of New York State residents live in homes that English is not the primary spoken language. Less than 10% of Washington County residents live in homes that do not speak English as a primary language.

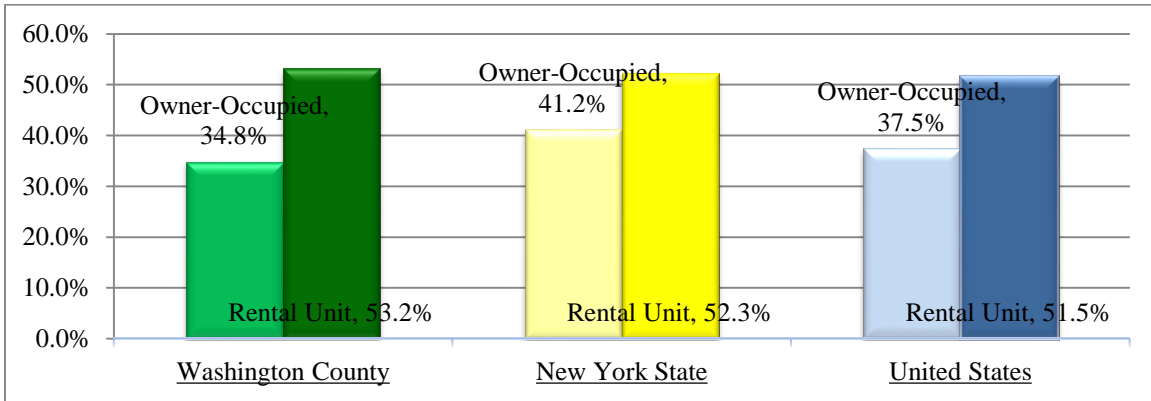
**Figure7:**  
**Level of Education, Washington County, New York State, and United States, 2010**



Source: American Fact Finder: DP02

The New York State high school graduation rate was 70.8% in 2010. Nationally, the high school graduation rate in 2010 was 74.9%. Washington County does very well in comparison to the state and national rate of high school graduation and GED as well as college education. Those with some college are right there with state and national rates.

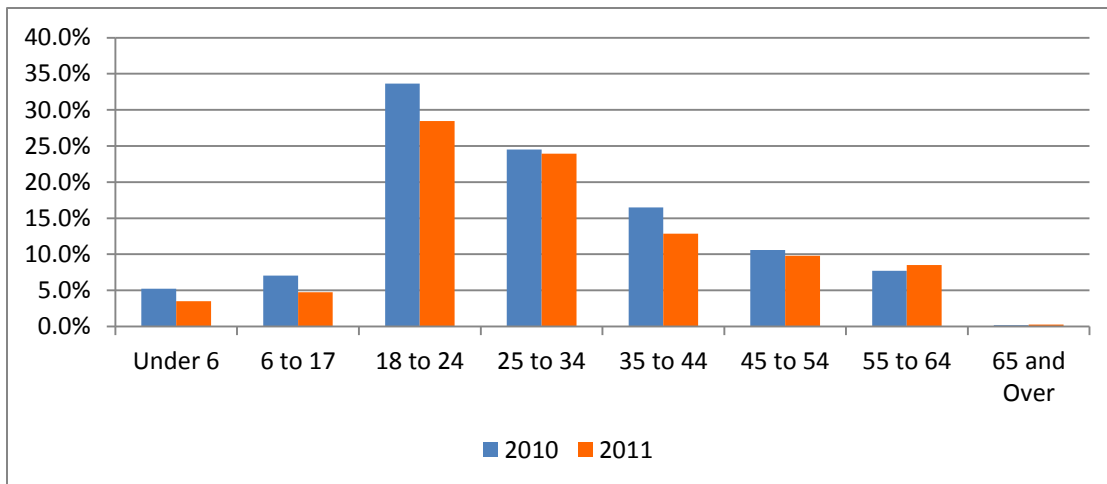
**Figure 8:**  
**Percentage of Households with Monthly Housing Costs at Least 30% of Total Household Income**



Source: US Census Bureau

This crude measure shows economic stress in a household. Renters in Washington County devote larger portions of their income on a monthly basis to housing than homeowners in Washington County. This may be reflective of the difficulties of socioeconomic status, poverty, and education levels leading to an inability to afford their own home.

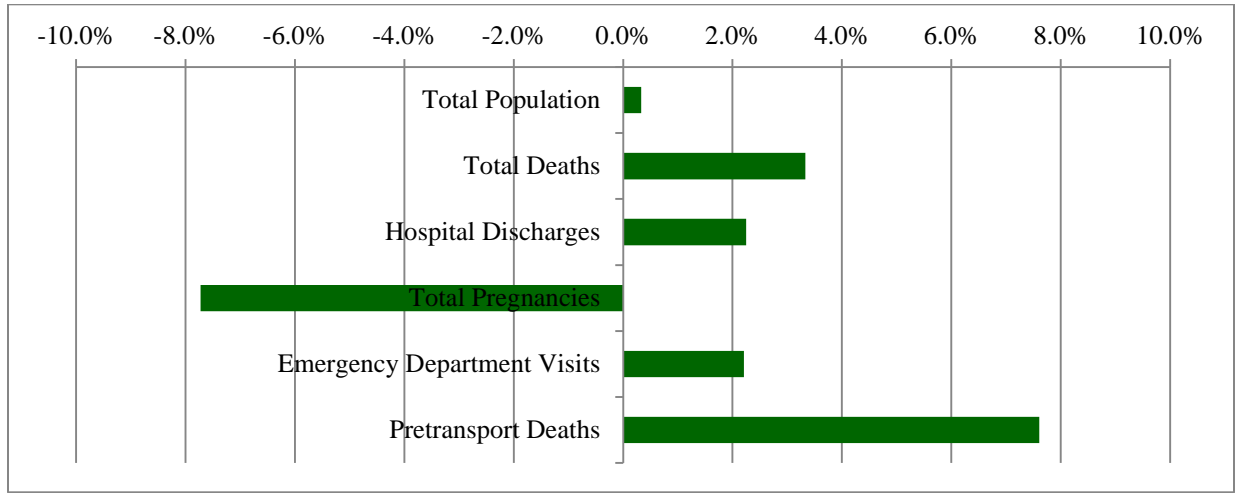
**Figure 9:**  
**Change in Percentage of Population who were Uninsured by Gender & Age Group, Washington County, 2010-2011**



Source: American Fact Finder

The percentage of uninsured Washington County residents in 2010-2011 shows a drop in all age groups except those 55-64 years old. This could be a reflection of job loss and/or retirement with gaps in coverage while waiting for Medicare coverage to begin.

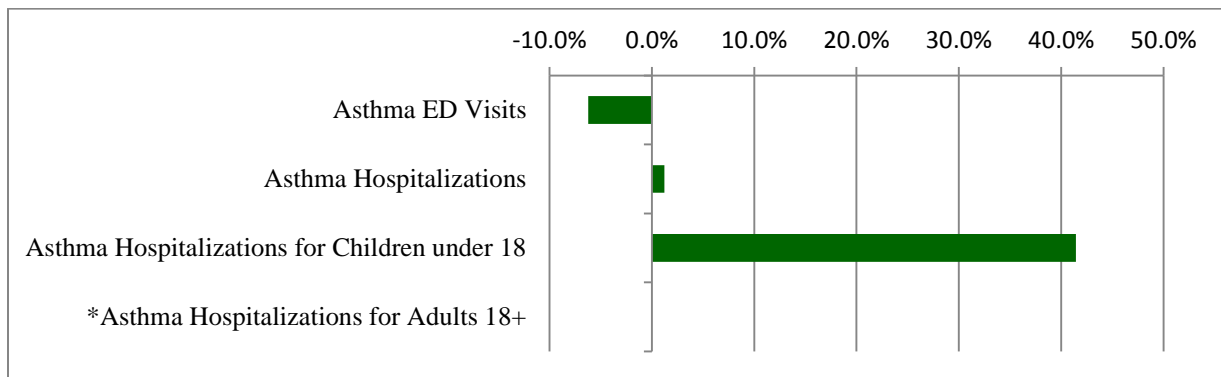
**Figure 10:**  
**3- Year Trends for Access to Care in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Accesses to care in Washington County is impacted by the aging population, lack of engagement in preventative care, healthcare screenings and wellness visits and follow up with treatment as evident by the rates of pre-transport deaths. The percentage of adults with regular health care providers (81.8) was lower than the ARHN region (86.6%) and the Prevention Agenda benchmark of 90.8%. The rate of age adjusted adults with avoidable hospitalizations (139.1) per 100,000 population was lower than the ARHN region (147.3) but slightly higher than the Prevention Agenda benchmark of 133.3. Figure 11:

**3- Year Trends for Asthma in Washington County**



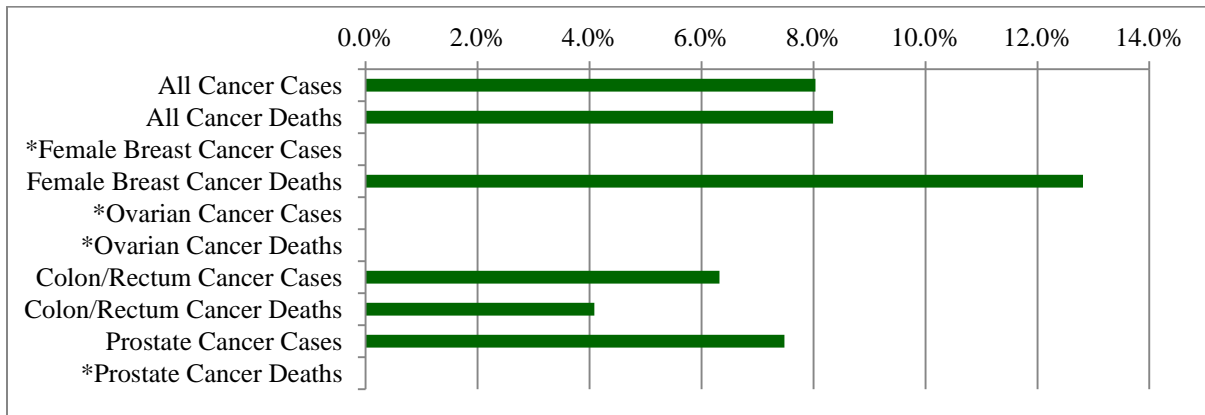
Source: Robert Martiniano, Center for Health Workforce Studies

The increases in children hospitalizations for asthma are reflective of the normalized attitude that many Washington County residents, especially youth, have towards tobacco use and secondhand smoke exposure.

***\*No significant change in trend noted***



**Figure 12:**  
**3- Year Trends for Cancer in Washington County**

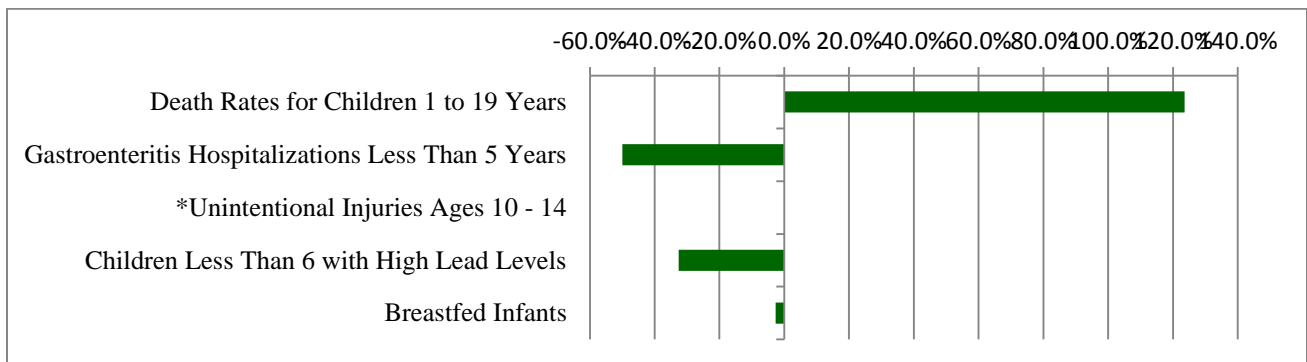


Source: Robert Martiniano, Center for Health Workforce Studies

Cancer cases and deaths trends demonstrate an overall increase. With regular healthcare screenings, residents will have the advantage of early detection. Lack of engagement in medical care is significant in Washington County and trends do reflect that late stage diagnosis and access to care is below the Prevention Agenda benchmark.

*\*No significant change in trend noted*

**Figure 13:**  
**3-Year Trends for Child Health in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

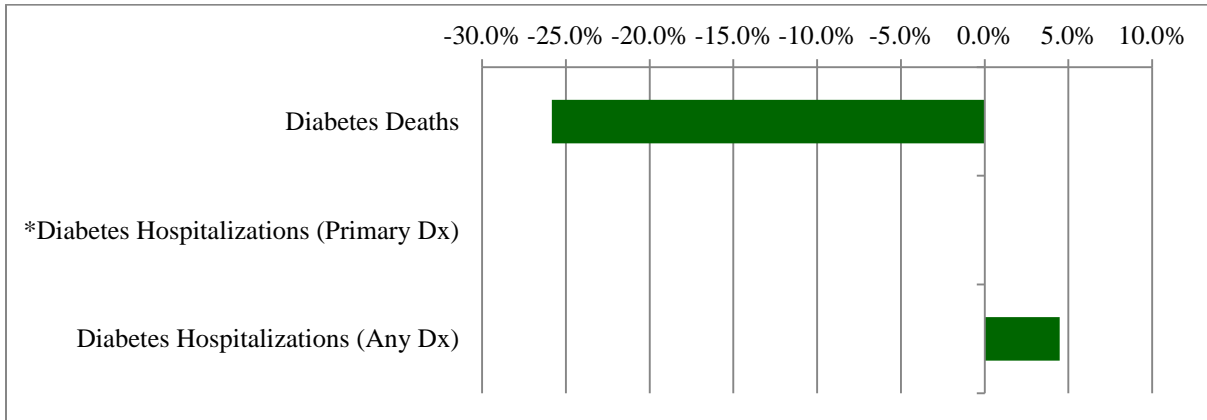
Trends in children's death rates in Washington County are showing an increase compared to state and national trends. Motor Vehicle related accidents, self- injury and homicides in Washington County are worse in comparison to the Prevention Agenda benchmark.

Although Washington County data trends fail to represent a significant change for unintentional injuries ages 10-14 (17.7), when compared to regional data rates show an increase. When compared to Upstate rates (19.3) and overall New York State rates (21.1), Washington County is better.

Breastfed infant trends show a slight decrease and children testing positive for elevated lead levels have decreased.

*\*No significant change in trend noted*

**Figure 14:**  
**3-Year Trends for Diabetes in Washington County**

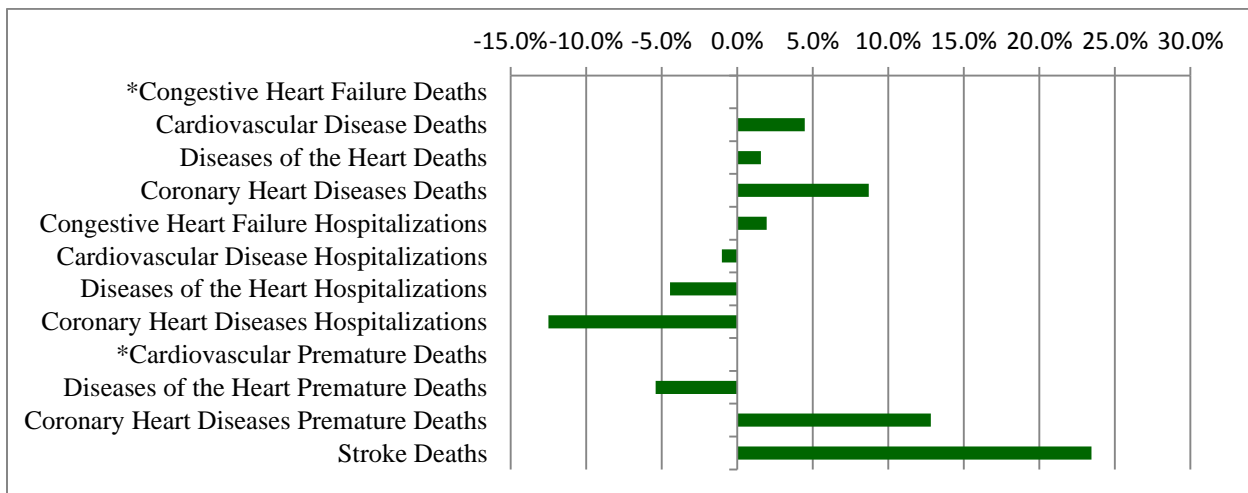


Source: Robert Martiniano, Center for Health Workforce Studies

Diabetes is one of many chronic diseases that is of high prevalence in Washington County. Primary diagnosis rates (13.4) are below NYS (15.5). Locally, data reflects a decrease in diabetes deaths, but is still considered worse in comparison to the Prevention Agenda benchmark. There is an increase in diabetes related hospitalizations and is worse in comparison to the benchmark also. Co- morbidity could be an explanation for this trend.

*\*No significant change in trend noted*

**Figure 15:**  
**3-Year Trends for Heart Disease and Stroke in Washington County**

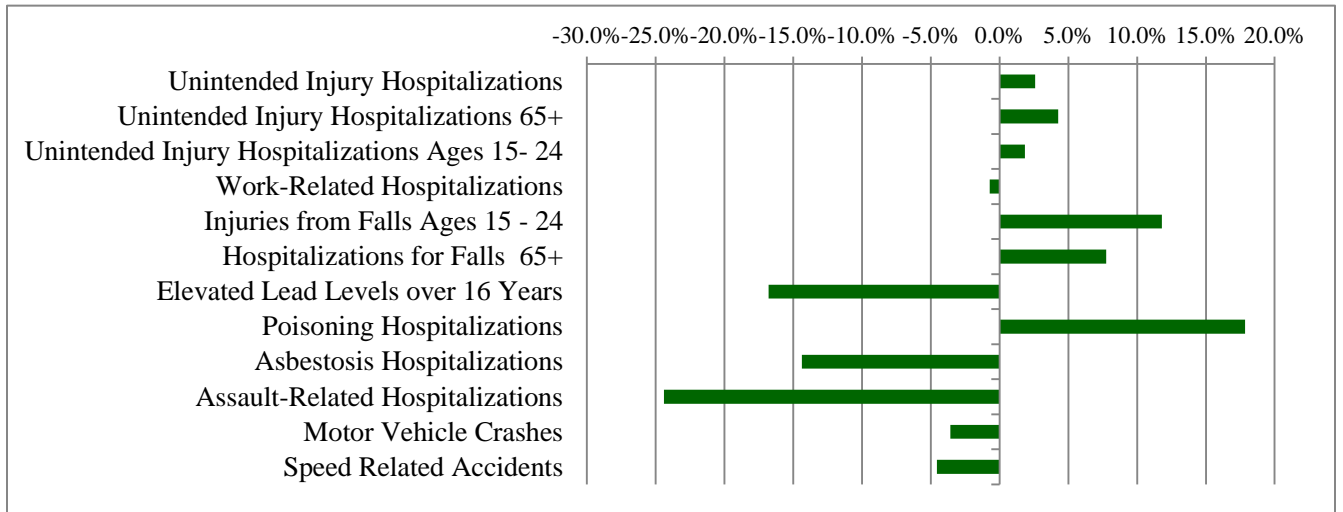


Source: Robert Martiniano, Center for Health Workforce Studies

Deaths associated to heart disease and stroke have increased in Washington County are worse in comparison to the Prevention Agenda benchmark. Health disparities play a significant role within these disease trends.

*\*No significant change in trend noted*

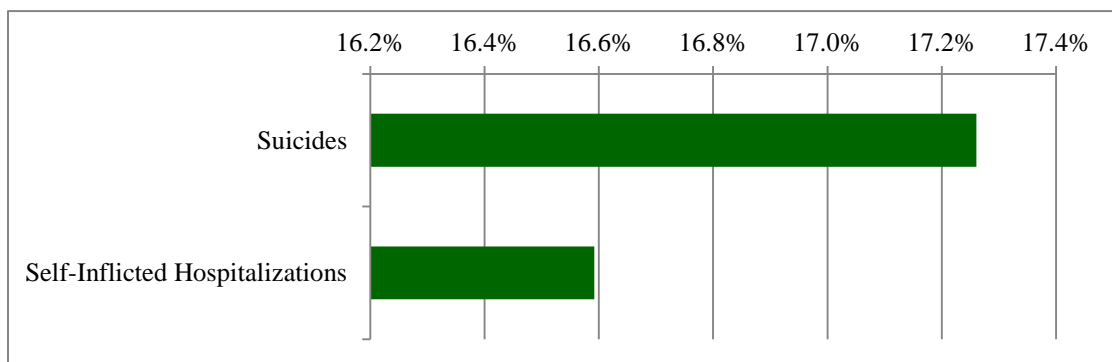
**Figure 16:**  
**3-Year Trends for Injuries in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Occupational injuries are a challenge in Washington County. Malignant Mesothelioma, pneumoconiosis, asbestosis and work related hospitalizations are above their respective Upstate New York rates. The rate of ED visits for occupational injuries for working adolescents ages 15-19 was lower (51.1) than both the ARHN (56.1) and Upstate New York (51.8) rates but higher than the Prevention Agenda benchmark of 33.0. Additionally, the rate of elevated blood lead levels for those employed per 10,000 population ages 16 and above was higher than both the ARHN and Upstate New York rates.

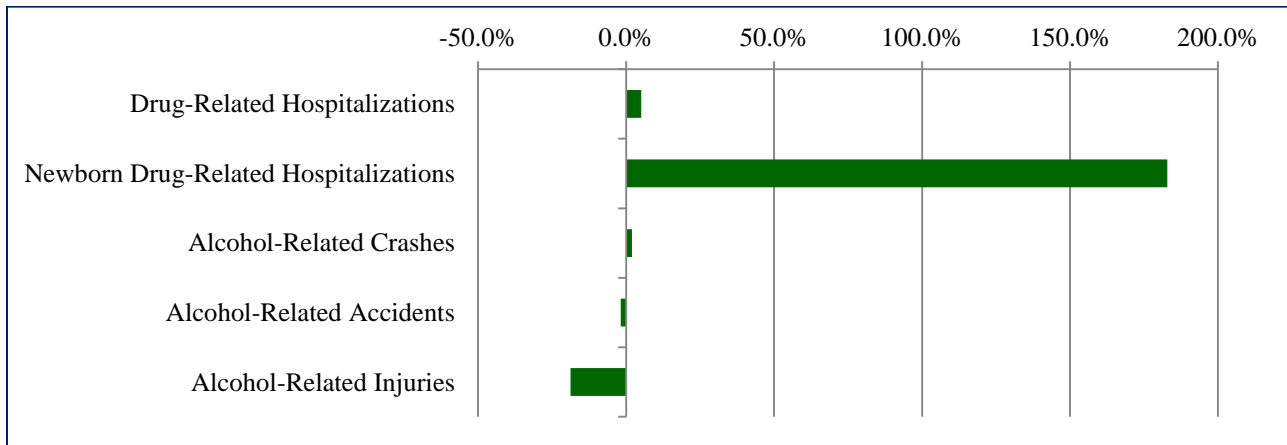
**Figure 17:**  
**3-Year Trends for Mental Health in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Suicide and self-injury rates have taken an unfavorable turn in Washington County and are worse in comparison to the Prevention Agenda benchmark. Mental emotional behaviors have been trending in adolescents age 15-19 and in adults calling for increased access to resources and programming to support those suffering from mental illness.

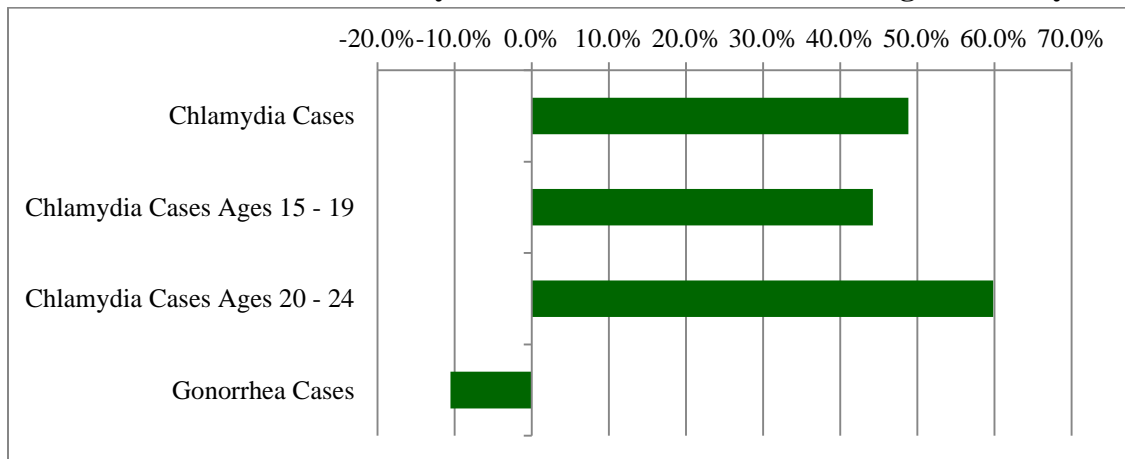
**Figure 18:**  
**3-Year Trends for Substance Abuse in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Drug related hospitalizations trends have reflected an increase but not as significant as newborn drug-related hospitalizations. Substance use and binge drinking rates in Washington County and health related problems as a result have increased.

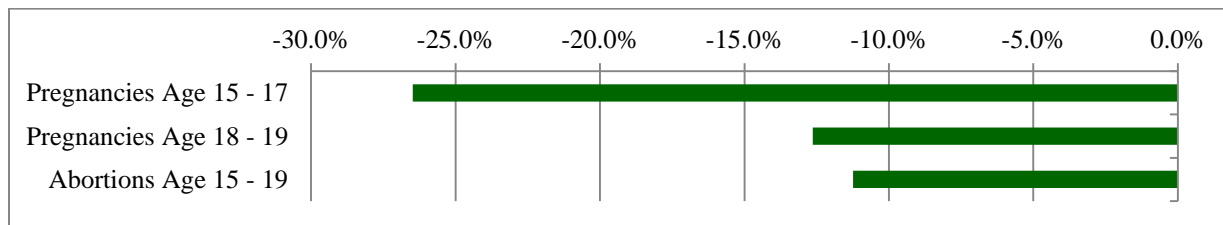
**Figure 19:**  
**3-Year Trends for Sexually Transmitted Diseases in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Sexually Transmitted Disease trends have increased but are below regional and state rates. Although STD trends are less than Prevention Agenda benchmarks, they continue to increase. This will merit monitoring overtime. The percentage of children ages 19-35 months with appropriate immunization series in the County (58.3%) was lower than the Prevention Agenda benchmark of 80%. Additionally, the percentage of females ages 13-17 with the 3 dose HPV vaccine (34.2) was also lower than the Prevention Agenda benchmark of 50%.

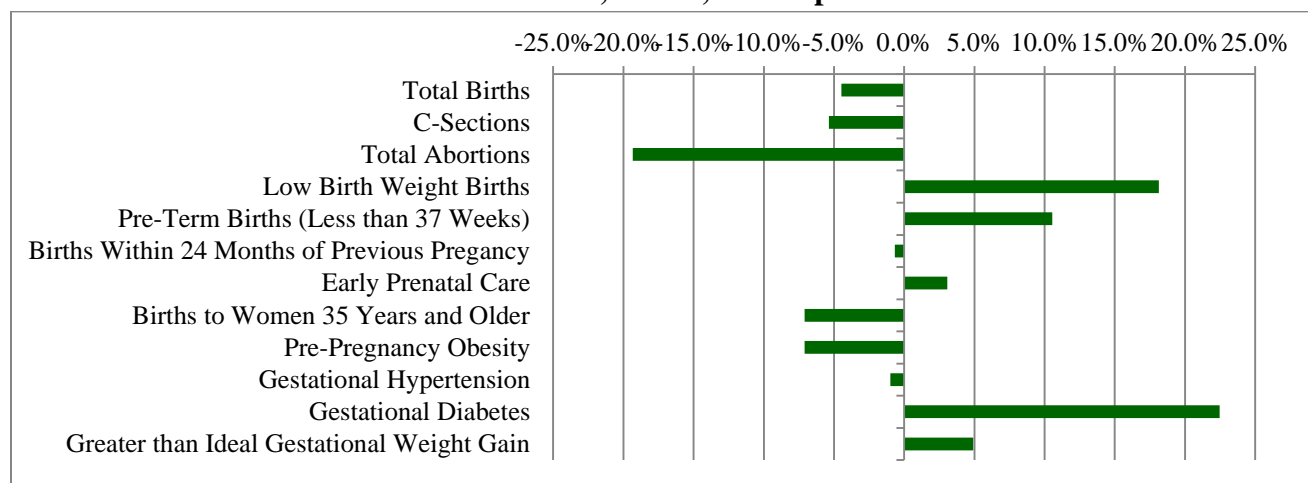
**Figure 20:**  
**3-Year Trends for Teen Pregnancy in Washington County**



Source: Robert Martiniano, Center for Health Workforce Studies

Teen pregnancies within 15-17 year olds are above state and regional rates but are showing a decrease in trends. Pregnancies at 18-19 years old and abortion trends of 15-19 year old in Washington County have demonstrated a favorable decrease as well. Teen pregnancy rates in Washington County, although showing decreases, continue to merit regular programming and attention.

**Figure 21:**  
**3- Year Trends for Maternal, Infant, and Reproductive Health**



Source: Robert Martiniano, Center for Health Workforce Studies

The rates of birth per 1,000 females to teenagers ages 15 to 17 and 18 to 19 in Washington County were higher than those in the ARHN region and Upstate New York, particularly births to woman ages 18-19 (67.8 per 1,000 females in the county compared to 35.4 in Upstate New York). Pregnant woman receiving WIC had higher rates of pre-pregnancy obesity, gestational weight gain greater than ideal, gestational diabetes and gestational hypertension than comparable populations in New York.

The percentages of children screened for lead by age 9 months, 18 months and with two lead screenings by age 36 months were lower in Washington County than their respective Upstate New York percentages. Additionally the rate of children younger than 6 years old with confirmed blood lead levels greater than or equal to 10 mg/dl per 1,000 children tested was higher than both the ARHN and Upstate New York rates.

**Table 1:**  
**County Health Rankings, Outcomes and Factors for Selected NYS Counties**

	<b>Mortality</b>	<b>Morbidity</b>	<b>Healthy Behaviors</b>	<b>Clinical Care</b>	<b>Economic Factors</b>	<b>Physical Environment</b>
County	Rank	Rank	Rank	Rank	Rank	Rank
Albany	34	26	15	6	16	15
Clinton	32	27	32	32	47	56
Columbia	49	39	9	45	14	7
Essex	14	16	16	37	32	2
Franklin	42	23	36	51	55	45
Fulton	37	60	55	48	59	10
Greene	55	48	52	44	46	5
Hamilton	61	33	17	41	11	44
Rensselaer	31	46	40	28	18	38
Saratoga	8	6	12	5	2	9
Schenectady	27	42	24	11	33	46
Warren	16	7	44	2	23	3
<b>Washington</b>	<b>33</b>	<b>45</b>	<b>56</b>	<b>26</b>	<b>28</b>	<b>28</b>

*Source: County Health Rankings & Roadmaps, A Healthier Nation, County by County, Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute – 2013*

**Note:** *Highlighted cells show the Counties that rank highest in the region.*

County Health Indicators are useful benchmarks in demonstrating that there are many factors beyond medical care that influence our health. Health outcomes, which include morbidity and mortality, describe the overall health of the County.

Washington County scores poorly here placing in the bottom quartile in the performance. Health factors including health behaviors, clinical care, social and economic factors and physical environment factors are the factors that influence health and serve as a way to estimate future health in the County. Unfortunately this is an area we scored more poorly than outcomes placing 56 out of 62 NYS Counties.

The good news is there are areas that can be impacted. With the Community Health Assessment process and the Community Health Improvement Plan and partnerships we have the ability to brighten our health future. Where we live matters to our health. We need to evaluate impact and influence not only programming, but also policies to improve population health.

**Table 1A:**  
**Washington County Comparison of Outcomes/Factors to State and Regional Rankings**

<b>Outcome/Factor</b>	<b>State-Wide Rank (of 62 Counties)</b>	<b>Greater Regional Rank (of 13 Counties)</b>
Mortality	33	7
Morbidity	45	10
Healthy Behaviors	56	13
Clinical Care	26	5
Economic Factors	28	7
Physical Environment	28	8

*Source: County Health Rankings & Roadmaps, A Healthier Nation, County by County, Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute – 2013*

Washington County scores poorly here placing in the bottom quartile in the performance. Health factors including health behaviors, clinical care, social and economic factors and physical environment factors are the factors that influence health and serve as a way to estimate future health in the County. Unfortunately this is an area we scored more poorly than outcomes placing 56 out of 62 NYS Counties.

**Table 2:**  
**County Health Rankings, Factors-Focus Areas for Selected NYS Counties**

	<b>Tobacco Use</b>	<b>Diet and Exercise</b>	<b>Alcohol Use</b>	<b>Sexual Activity</b>	<b>Access to Care</b>	<b>Quality of Care</b>	
County	Rank	Rank	Rank	Rank	Rank	Rank	
Albany	22	6	22	37	6	14	
Clinton	20	37	59	21	24	50	
Columbia	6	8	52	25	44	33	
Essex	10	20	50	11	52	13	
Franklin	21	33	56	41	57	38	
Fulton	52	46	54	43	41	47	
Greene	53	40	46	28	48	24	
Hamilton	31	7	32	17	61	2	
Rensselaer	40	35	43	42	25	45	
Saratoga	14	15	29	6	7	12	
Schenectady	29	27	5	49	19	6	
Warren	45	30	45	34	9	4	
<b>Washington</b>	<b>56</b>	<b>54</b>	<b>31</b>	<b>44</b>	<b>51</b>	<b>7</b>	
	<b>Education</b>	<b>Employment</b>	<b>Income</b>	<b>Family &amp; Social Support</b>	<b>Community Safety</b>	<b>Environmental Quality</b>	<b>Built Environment</b>
County	Rank	Rank	Rank	Rank	Rank	Rank	Rank
Albany	9	8	20	42	55	1	35
Clinton	44	58	22	29	19	7	57
Columbia	33	10	11	25	27	3	15
Essex	27	50	30	7	15	25	2
Franklin	55	48	59	41	14	44	46
Fulton	61	59	49	56	35	4	21
Greene	50	45	31	37	37	35	4
Hamilton	10	23	21	8	8	54	33
Rensselaer	11	14	18	45	51	5	59
Saratoga	3	3	2	1	4	9	10
Schenectady	29	14	39	9	56	2	61
Warren	37	35	22	27	18	39	3
<b>Washington</b>	<b>58</b>	<b>14</b>	<b>31</b>	<b>16</b>	<b>16</b>	<b>19</b>	<b>34</b>

Source: County Health Rankings & Roadmaps, A Healthier Nation, County by County, Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute – 2013Note: Highlighted cells show the Counties that rank highest in the region.

**Note:** *Highlighted cells show the Counties that rank highest in the region.*



**Table 2A:**  
**Washington County Comparison of Factors/Focus Areas to State and Regional Rankings**

<b><u>Factor/Focus Area</u></b>	<b><u>State-Wide Rank</u> <u>(of 62 Counties)</u></b>	<b><u>Greater Regional Rank</u> <u>(of 13 Counties)</u></b>
<b>Tobacco Use</b>	56	13
<b>Diet and Exercise</b>	54	13
<b>Alcohol Use</b>	31	3
<b>Sexual Activity</b>	44	12
<b>Access to Care</b>	51	10
<b>Quality of Care</b>	7	4
<b>Education</b>	58	12
<b>Employment</b>	14	4
<b>Income</b>	31	8
<b>Family &amp; Social Support</b>	16	5
<b>Community Safety</b>	16	5
<b>Environmental Quality</b>	19	8
<b>Built Environment</b>	34	8

Washington County factor/focus areas in comparison to state wide and regional rankings show a significant need of intervention specific to behaviors that contribute to high incidences of chronic disease throughout the county. Ranking of tobacco use, diet and exercise, access to care and education show that Washington County residents continue to engage in unhealthy behaviors and are not accessing care and education interventions to create healthier behavior changes that will reduce risk factors leading to a decrease in incidence of chronic disease.

**Table 3:**  
**Leading Causes of Death in Washington County**

	1st	2nd	3rd	4th	5th
Causes of Death	Cancer 150 190 per 100,000	Heart Disease 131 166 per 100,000	CLRD 48 60 per 100,000	Stroke 34 37 per 100, 000	Diabetes 12 14 per 100,000
Causes of Premature Death	Cancer 694 288 per 100,000	Heart Disease 126 233 per 100,000	Unintentional Injury 47 84 per 100,000	CLRD 42 96 per 100,000	Suicide 26 50 per 100,000

Source: New York State Web Site, 2010 Data

***Note: Premature Death is defined as death before age 75.***

Throughout the region, the leading causes of death are cancer and heart disease which reflect Washington County's experience. With the exception of unintentional injury and suicide, many of the leading causes of death are related to chronic diseases which are preventable by modifying risk factors through policy, environment and behavioral changes that influence better health and wellbeing.

**Table 3A:  
Leading Causes of Premature Death for Counties in the Greater Region**

County	1st	2nd	3rd	4th	5th
Albany	Cancer	Heart Disease	Unintentional Injury	Chronic Lower Respiratory Disease	Stroke
Clinton	Cancer	Heart Disease	Unintentional Injury	Chronic Lower Respiratory Disease	Suicide
Columbia	Cancer	Heart Disease	Unintentional Injury	Chronic Lower Respiratory Disease	Stroke
Essex	Cancer	Heart Disease	Unintentional Injury Chronic Lower Respiratory Disease		Liver Disease
Franklin	Cancer	Heart Disease	Unintentional Injury	Chronic Lower Respiratory Disease	Suicide
Fulton	Cancer	Heart Disease	Chronic Lower Respiratory Disease	Unintentional Injury	Septicemia
Greene	Cancer	Heart Disease	Chronic Lower Respiratory Disease Unintentional Injury		Stroke
Hamilton	Cancer	Heart Disease	Unintentional Injury	Liver Disease	Chronic Lower Respiratory Disease
Rensselaer	Cancer	Heart Disease	Chronic Lower Respiratory Disease	Unintentional Injury	Stroke
Saratoga	Cancer	Heart Disease	Chronic Lower Respiratory Disease	Unintentional Injury	Stroke
Schenectady	Cancer	Heart Disease	Chronic Lower Respiratory Disease	Unintentional Injury	Diabetes
Warren	Cancer	Heart Disease	Chronic Lower Respiratory Disease	Unintentional Injury	Suicide
Washington	Cancer	Heart Disease	Unintentional Injury	Chronic Lower Respiratory Disease	Suicide

Source: New York State Web Site. 2008-2010Data

Throughout the region, the leading causes of premature death are cancer and heart disease which reflect Washington County's experience. With the exception of unintentional injury and suicide, leading causes of premature death in Washington County are related to chronic diseases which are largely preventable by modifying risk factors through policy, environment and behavioral changes that influence better health and wellbeing.

**Table 4:**  
**Health Needs Priority Rankings**

Priority Rank	Leading Cause of Premature Death Washington County	Comparison to Benchmark	*Quartile Score	County Health Rankings for NYS	ARHN Survey Results	Other: Washington County 3 Priority Areas
1	Cancer	<b>Worse</b>	1	Alcohol Use	Prevent Chronic Disease	Chronic Disease: Reducing Obesity in Children and Adults
2	Heart Disease	<b>Worse</b>	1	Diet & Exercise	Promote MEB's & Prevent Substance Abuse	Chronic Disease: Reduce Illness, Disability, Diagnosis, and Deaths Associated with Tobacco and Second Hand Smoke Exposure
3	Unintentional Injury	<b>Worse</b>	1	Tobacco Use	Promote Healthy & Safe Environment	Promote Mental Health and Prevent Substance Abuse: Prevent Substance Abuse and MEB's
4	Chronic Lower Respiratory Disease	<b>Worse</b>	2	Quality of Care	Promote Healthy Women & Children	
5	Suicide	<b>Worse</b>	4	Built Environment	Prevent HIV/STI and Vaccine Preventable Diseases	

\*Quartile Score Definition:

Quartile 1: distances from their corresponding benchmarks were less than 25%

Quartile 2: distances from their corresponding benchmarks were between 25% and 49.9%

Quartile 3: distances from their corresponding benchmarks were between 50% and 74.9%

Quartile 4: distances from their corresponding benchmarks were between 75% and 100%

Health Needs Priority Rankings reflect a considerable need for interventions that focus on the leading causes of premature death in Washington County. The priority rankings above also show a rank worse in comparison to the 2017 Prevention Agenda Benchmarks. Ultimately, confirming that the severities of the prioritized causes of premature and preventable death in Washington County are of great concern and merit attention during the Community Health Improvement Planning period.

**Table 5:**  
**Health Indicator Trend Data**

	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Disparities			
Prevention Agenda Indicators			
1. Percentage of Overall Premature Deaths (Ages 35 - 64) , '08 - 10			
2. Ratio of Black, Non-Hispanic Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10			
3. Ratio of Hispanic/Latino Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10			
4. Rate of Adult Age-Adjusted Preventable Hospitalizations per 100,000 Population (Ages 18 Plus), '08 - 10			
5. Ratio of Black, Non-Hispanic Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10			
6. Ratio of Hispanic/Latino Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10			
7. Percentage of Adults ( Ages 18 - 64) with Health Insurance, '08/09			
8. Percentage of Adults with Regular Health Care Provider, '08/09			
Other Disparity Indicators			
1. Rate of Total Deaths per 100,000 Population, '08 - 10	561	610	599
2. Rate of Total Deaths per 100,000 Adjusted Population, '08 - 10	561	610	599
3. Rate of Emergency Department Visits per 10,000 Population, '08 - 10	19,538	19,894	20,197
4. Rate of Emergency Department Visits per 10,000 Adjusted Population, '08 - 10	19,538	19,894	20,197
5. Rate of Total Hospital Discharges per 10,000 Population, '08 - 10	7,296	7,563	7,628
6. Rate of Total Hospital Discharges per 10,000 Adjusted Population, '08 - 10	7,296	7,563	7,628
7. Percentage of Adults (18 and Older) Who Did Not Receive Care Due to Costs, '08/09			
8. % of Adults (18 and Older) with Poor Physical Health, '08/09			
9. % of Adults (18 and Older) with Physical Limitations, '08/09			
10. % of Adults (18 and Older) with Health Problems that Need Special Equipment, '08/09			
11. Percentage of Adults (18 and Older) with Disabilities, '08/09			
	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Injuries, Violence, and Occupational Health			
Prevention Agenda Indicators			
1. Rate of Hospitalizations due to Falls for Ages 65 Plus per 10,000 Population, '08 - 10	199	200	231
2. Rate of ED Visits due to Falls for Children Ages 1 - 4 per 10,000 Population Children Ages 1 - 4, '08 - 10			

3. Rate of Assault-Related Hospitalizations per 10,000 Population, '08 - 10	14	8	8
4. Ratio of Black, Non-Hispanic Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10			
5. Ratio of Hispanic/Latino Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10			
6. Ratio of Assault-Related Hospitalizations for Low-Income versus non-Low Income Zip Codes, '08 - 10			
7. Rate of ED Occupational Injuries Among Working Adolescents Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10			
Other Indicators			
1. Rate of Hospitalizations for Falls for Children Ages Under 10 per 10,000 Population Children Ages Under 10 , '08 - 10	1	5	1
2. Rate of Hospitalizations for Falls for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	2	0	2
3. Rate of Hospitalizations for Falls for Individuals Ages 15 - 24 per 10,000 Population Individuals Ages 15 - 24, '08 - 10	8	5	10
4. Rate of Hospitalizations for Falls for Adults Ages 25 - 64 per 10,000 Population Adults Ages 25 - 64, '08 - 10	67	55	63
5. Rate of Violent Crimes per 100,000 Population, '07 - 11			
6. Rate of Property Crimes per 100,000 Population, '07 - 11			
7. Rate of Total Crimes per 100,000 Population, '07 - 11			
8. Rate of Malignant Mesothelioma Cases, Ages 15 Plus, per 100,000 Population Ages 15 Plus, '07 - 09			
9. Rate of Pneumonconsis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	11	10	12
10. Rate of Asbestosis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	15	10	11
11. Rate of Work-Related Hospitalizations, Employed Ages 16 Plus per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	70	63	69
12. Rate of Elevated Blood Lead Levels Ages 16 Plus Employed per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	13	5	9
13. Rate of Total Motor Vehicle Crashes per 100,000 Population, '09 - 11	1,110	1,094	1,032
14. Rate of Pedestrian-Related Accidents per 100,000 Population, '09 - 11	15	12	10
15. Rate of Speed-Related Accidents per 100,000 Population, '09 - 11	157	167	143
16. Rate of Motor Vehicle Accident Deaths per 100,000 Population, '08 - 10	8	8	10
17. Rate of TBI Hospitalizations per 10,000 Population, '08 - 10	48	50	53
18. Rate of Unintentional Injury Hospitalizations per 10,000 Population, '08 - 10	533	505	561
19. Rate of Unintentional Injury Hospitalizations Ages 14 and Under per 10,000 Population Ages 14 and Under , '08 - 10	19	26	19
20. Rate of Unintentional Injury Hospitalizations Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 - 10	287	277	312
21. Rate of Poisoning Hospitalizations per 10,000 Population, '08 - 10	72	78	100

	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Outdoor Air Quality			
1. Number of Days with Unhealthy Ozone, 2007			
2. Number of Days with Unhealthy Particulated Matter, 2007			

	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Built Environment			
1. Percentage of the Population that Live in Jurisdictions that Adopted Climate Smart Communities Pledge, 2012			
2. Percentage of Commuters Who Use Alternative Modes of Transportation to Work, '07 - 11			
3. Percentage of Population with Low-Income and Low-Access to a Supermarket or Large Grocery Store, 2010			
4. Percentage of Homes in Vulnerable Neighborhoods that have Fewer Asthma Triggers During Home Revisits, '08 - 11			

	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Water Quality			
1. Percentage of Residents Served by Community Water Systems with Optimally Fluoridated Water, 2012			
	Number Per Year (If Available)		
	One	Two	Three
Prevention Agenda Indicators			
1. Percentage of Adults Ages 18 Plus Who are Obese, '08/09			
2. Percentage of Public School Children Who are Obese, '10 - 12			
Other Indicators			
1. Percentage of Total Students Overweight, '08 - 10			
2. Percentage of Elementary Students Overweight, Not Obese, '08 - 10			
3. Percentage of Elementary Students Obese, '08 - 10			
4. Percentage of Middle and High School Students Overweight, Not Obese, '08 - 10			
5. Percentage of Middle and High School Students Obese, '08 - 10			
6. Percentage of WIC Children Ages 2 - 4 Obese, '08 - 10			
7. Percentage of Age Adjusted Adults (Ages 18 Plus) Overweight or Obese, '08/09			
8. Percentage of Age Adjusted Adults (Ages 18 Plus) Who Did Not Participate in Leisure Activities Last 30 Days, '08/09			
9. Number of Recreational and Fitness Facilities per 100,000 Population, 2009			
10. Percentage of Age Adjusted Adults (Ages 18 Plus) Eating Five or More Vegetables per Day, '08/09			
11. Percentage of Age Adjusted Adults (Ages 18 Plus) with Cholesterol Check within the Last Five Years, '08/09			
12. Percentage of Age Adjusted Adults (18 Plus) Ever Diagnosed with High Blood Pressure, '08/09			
13. Percentage of Age Adjusted Adults (18 Plus) with Physician Diagnoses Angina, Heart Attack, or Stroke, '08/09			
14. Rate of Cardiovascular Disease Deaths per 100,000 Population, '08 - 10	164	179	179

15. Rate of Cardiovascular Premature Deaths ( Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	24	29	24
16. Rate of Pre transport Deaths per 100,000 Population, '08 - 10	95	93	110
17. Rate of Cardiovascular Hospitalizations per 10,000 Population, '08 - 10	1,095	1,104	1,073
18. Rate of Diseases of the Heart Deaths per 100,000 Population, '08 - 10	127	137	131
19. Rate of Diseases of the Heart Premature Deaths ( Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	19	25	17
20. Rate of Disease of the Heart Transport Deaths per 100,000 Population, '08 - 10	75	74	85
21. Rate of Disease of the Heart Hospitalizations per 10,000 Population, '08 - 10	817	783	746
22. Rate of Coronary Heart Diseases Deaths per 100,000 Population, '08 - 10	77	82	91
23. Rate of Coronary Heart Diseases Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	11	18	14
24. Rate of Coronary Heart Disease Transport Deaths per 100,000 Population, '08 - 10	44	39	57
25. Rate of Coronary Heart Disease Hospitalizations per 10,000 Population, '08 - 10	350	315	268
26. Rate of Congestive Heart Failure Deaths per 100,000 Population, '08 - 10	12	13	12
27. Rate of Congestive Heart Failure Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	1	1	0
28. Rate of Congestive Heart Failure Transport Deaths per 100,000 Population, '08 - 10	7	11	8
29. Rate of Congestive Heart Failure Hospitalizations per 10,000 Population, '08 - 10	177	199	184
30. Rate of Cerebrovascular (Stroke) Deaths per 100,000 Population, '08 - 10	21	25	32
31. Rate of Cerebrovascular (Stroke) Hospitalizations per 10,000 Population, '08 - 10	142	160	169
32. Rate of Hypertension Hospitalizations (Ages 18 Plus) per 100,000 Population Ages 18 Plus, '08 - 10	8	14	18
33. Rate of Diabetes Deaths per 100,000 Population, '08 - 10	20	21	11
34. Rate of Diabetes Hospitalizations (Primary Diagnosis) per 10,000 Population, '08 - 10	88	77	88
35. Rate of Diabetes Hospitalizations (Any Diagnosis) per 10,000 Population, '08 - 10	1,527	1,614	1,667
	<b>Number Per Year (If Available)</b>		
	<b>One</b>	<b>Two</b>	<b>Three</b>
<b>Prevention Agenda Indicators</b>			
1. Percentage of Adults Ages 18 Plus Who Smoke '08/09			
<b>Other Indicators</b>			
1. Rate of Chronic Lower Respiratory Disease Deaths per 100,000 Population, '08 - 10	34	31	48
2. Rate of Chronic Lower Respiratory Disease Hospitalizations per 10,000 Population, '08 - 10	294	325	268
3. Rate of Asthma Deaths per 100,000 Population, '08 - 10	0	0	0
4. Rate of Asthma Hospitalizations per 10,000 Population, '08 - 10	81	93	83
5. Rate of Asthma Hospitalizations, Ages 25 - 44, per 10,000 Population Ages 25 - 44, '08 - 10	16	15	16
6. Rate of Asthma Hospitalizations, Ages 45 - 64, per 10,000 Population Ages 45 - 64, '08 - 10	30	38	36
7. Rate of Asthma Hospitalizations, Ages 65 Plus, per 10,000 Population Ages 65 Plus, '08 - 10	24	21	18
8. Percentage of Adults with Asthma, '08/09			
9. Rate of Lung and Bronchus Deaths per 100,000 Population, '07 - 09	38	40	46
10. Rate of Lung and Bronchus Cases per 100,000 Population, '07- 09	69	62	81
11. Number of Registered Tobacco Vendors per 100,000 Population, '09 - 10			
12. Percentage of Vendors with Sales to Minors Violations, '09 - 10			



13. Percentage of Vendors with Complaints, '09 - 10			
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	Number Per Year (If Available)		
	One	Two	Three
Prevention Agenda Indicators			
1. Percentage of Adults Ages 50 - 75 Who Received Colorectal Screenings Based on Recent Guidelines, '08/09			
2. Rate of Asthma ED Visits per 10,000 Population, '08 - 10	266	249	234
3. Rate of Asthma ED Visits Ages 0 - 4, per 10,000 Population Ages, 0 - 4, '08 - 10			
4. Rate of Short-term Diabetes Hospitalizations for Ages 6 - 17 per 10,000 Population, Ages 6 - 17, '08 - 10			
5. Rate of Short-term Diabetes Hospitalizations for Ages 18 Plus per 10,000 Population, Ages 18 Plus, '08 - 10			
6. Rate of Age Adjusted Heart Attack Hospitalizations per 10,000 Population, 2010			
Other Indicators			
1. Rate of Asthma ED Visits for Ages 18 - 64 per 10,000 Population Ages 18 - 64, '08 - 10	187	169	142
2. Rate of Asthma ED Visits for Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 10	12	11	17
3. Rate of All Cancer Cases per 100,000 Population, '07 - 09	371	433	433
4. Rate of all Cancer Deaths per 100,000 Population, '07 - 09	138	141	162
5. Rate of Female Breast Cancer Cases per 100,000 Female Population, '07 -09	54	53	54
6. Rate of Female Late Stage Breast Cancer Cases per 100,000 Female Population, '07 - 09			
7. Rate of Female Breast Cancer Deaths per 100,000 Female Population, '07	11	7	14
8. Percentage of Women Ages 40 Plus With Mammogram within Last Two Years, '08/ 09			
9. Rate of Cervix and Uterine Cancer Cases per 100,000 Female Population, '07 - 09			
10. Rate of Cervix and Uterine Cancer Deaths per 100,000 Female Population, '07 - 09			
11. Percentage of Women Ages 18 Plus with a Pap Smear within the Last Three Years, '08/ 09			
12. Rate of Ovarian Cancer Cases per 100,000 Female Population, '07 - 09			
13. Rate of Ovarian Cancer Deaths per 100,000 Female Population, '07 - 09			
14. Rate of Colon and Rectum Cancer Cases per 100,000 Population, '07 - 09	23	40	26
15. Rate of Colon and Rectum Cancer Deaths per 100,000 Population, '07 - 09	13	12	13
16. Percentage of Adults Ages 50 Plus with Home Blood Stool Test within the Last Two Years, '08/09			
17. Percentage of Adults Ages 50 Plus with Sigmoidoscopy or Colonoscopy within Last Ten Years, '08/09			
18. Rate of Prostate Cancer Deaths per 100,000 Male Population, '07 - 09	9	8	9
19. Rate of Prostate Cancer Cases per 100,000 Male Population, '07 - 09	58	68	67
20. Rate of Prostate Cancer Late Stage Cancer Cases per 100,000 Male Population, '07 - 09			
21. Percentage of Males, Ages 40 Plus with a Digital Rectal Exam within Last Two Years, '08/09			
22. Percentage of Males, Ages 40 Plus with a Prostate Antigen Test within Last Two Years, '08/09			
23. Rate of Melanoma Cancer Deaths per 100,000 Population, '07 - '09			
24. Percentage of Medicaid Enrollees with at Least One Preventive Dental Visit within the Year, '08 - 10	2,930	3,625	3,848
25. Percentage of Age Adjusted Adults with a Dental Visit Within the Last 12 Months, '08/09	2,430	3,041	3,156
26. Oral Cavity and Pharynx Cancer Deaths per 100,000 Population, '07-09			

27. Oral Cavity and Pharynx Cancer Deaths, Adults Ages 45 - 74, per 100,000 Population, Ages 45 - 74, '07 - 09			
28. Oral Cavity and Pharynx Cancer Cases per 100,000 Population, '07 - 09	8	7	8

	Number Per Year (If Available)		
	One	Two	Three
Focus Area: Maternal and Infant Health			
Prevention Agenda Indicators			
1. Percentage Preterm Births < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	54	57	66
2. Ratio of Preterm Births (< 37 wks.) Black/NH to White/NH, '08 - 10			
3. Ratio of Preterm Births (< 37 wks.) Hisp/Latino to White/NH, '08 - 10			
4. Ratio of Preterm Births (< 37 wks.) Medicaid to Non-Medicaid, '08 - 10			
5. Rate of Maternal Mortality per 100,000 Births, '08 - 10	0	0	0
6. Percentage of Live Birth Infants Exclusively Breastfed in Delivery Hospital, '08 - 10			
7. Ratio of Infants Exclusively Breastfed in Delivery Hospital Black, non-Hispanic to White, non-Hispanic, '08 - 10			
8. Ratio of Infants Exclusively Breastfed in Delivery Hospital Hispanic/Latino to White, non-Hispanic, '08 - 10			
9. Ratio of Infants Exclusively Breastfed in Delivery Hospital Medicaid to Non-Medicaid Births, '08 - 10			

Other Indicators			
1. Percentage Preterm Births < 32 weeks of Total Births Where Gestation Period is Known, '08 - 10	10	9	17
2. Percentage Preterm Births 32 to < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	44	48	49
3. Percentage of Total Births with Weights Less Than 1,500 grams, '08 - 10	9	6	17
4. Percentage of Singleton Births with Weights Less Than 1,500 grams, '08 - 10	7	4	9
5. Percentage of Total Births with Weights Less Than 2,500 grams, '08 - 10	43	43	60
6. Percentage of Singleton Births with Weights Less Than 2,500 grams, '08 - 10	35	30	36
7. Percentage of Total Births for Black, Non-Hispanic, with Weights Less than 2,500 Grams, '08 - 10			
8. Percentage of Total Births for Hispanic/Latino, with Weights Less than 2,500 Grams, '08 - 10			
9. Infant Mortality Rate per 1,000 Live Births, '08 - 10			
10. Infant Mortality Rate for Black, Non-Hispanic per 1,000 Births, '08 - 10			
11. Infant Mortality Rate for Hispanic/Latino per 1,000 Births, '08 - 10			
12. Rate of Deaths (28 Weeks Gestation to Seven Days) per 1,000 Live Births and Perinatal Deaths, '08 - 10	4	2	6
13. Percentage Early Prenatal Care of Total Births Where Prenatal Care Status is Known, '08 - 10	354	369	376
14. Percentage Early Prenatal Care for Black, Non-Hispanic, '08 - 10			
15. Percentage Early Prenatal Care for Hispanic/Latino, '08 - 10			
16. Percentage APGAR Scores of Less Than Five at Five Minute Mark of Births Where APGAR Score is Known, '08 - 10	7	5	13
17. Rate of Newborn Drug Related Hospitalizations per 10,000 Births, '08 - 10	1	1	8

18. Percentage WIC Women Breastfed at Six months, '08 - 10			
19. Percentage Infants Receiving Any Breast Milk in Delivery Hospital, '08 - 10	414	392	392

	Number Per Year (If Available)		
	One	Two	Three

Prevention Agenda Indicators			
1. Percent of Births within 24 months of Previous Pregnancy, '08 - 10	149	161	147
2. Rate of Pregnancies Ages 15 - 17 year per 1,000 Females Ages 15-17, '08 - 10	37	29	20
3. Ratio of Pregnancy Rates for Ages 15 - 17 Black, non-Hispanic to White, non-Hispanic, '08 - 10			
4. Ratio of Pregnancy Rates for Ages 15 - 17 Hispanic/Latino to White, non-Hispanic, '08 - 10			
5. Percent of Unintended Births to Total Births, 2011			
6. Ratio of Unintended Births Black, non-Hispanic to White, non-Hispanic, '08 - 10			
7. Ratio of Unintended Births Hispanic/Latino to White, non-Hispanic, '08 - 10			
8. Ratio of Unintended Births Medicaid to Non-Medicaid, '08 - 10			
9. Percentage of Women Ages 18- 64 with Health Insurance, '08/09			

Other Indicators			
1. Rate of Total Births per 1,000 Females Ages 15-44, '08 - 10	662	625	604
2. Percent Multiple Births of Total Births, '08 - 10	20	26	30
3. Percent C-Sections to Total Births, '08 - 10	230	199	206
4. Rate of Total Pregnancies per 1,000 Females Ages 15-44, '08 - 10	862	801	734
5. Rate of Births Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	1	1	0
6. Rate of Pregnancies Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	2	1	1
7. Rate of Births Ages 15 - 17 per 1,000 Females Ages 15-17, '08 - 10	17	16	14
8. Rate of Births Ages 15 - 19 per 1,000 Females Ages 15-19, '08 - 10	75	66	51
9. Rate of Pregnancies Ages 15 - 19 per 1,000 Females Ages 5-19, '08 - 10	113	102	78
10. Rate of Births Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	58	50	37
11. Rate of Pregnancies Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	76	73	58
12. Percent Total Births to Women Ages 35 Plus, '08 - 10	73	60	63
13. Rate of Abortions Ages 15 - 19 per 100 Live Births, Mothers Ages 15-19, '08 - 10	33	34	26
14. Rate of Abortions All Ages per 100 Live Births to All Mothers, '08 - 10	166	144	108
15. Percentage of WIC Women Pre-pregnancy Underweight, '08 - 10	25	31	15
16. Percentage of WIC Women Pre-pregnancy Overweight but not Obese, '08 - 10	123	105	84
17. Percentage of WIC Women Pre-pregnancy Obese, '08 - 10	129	133	109
18. Percentage of WIC Women with Gestational Weight Gain Greater than Ideal, '08 - 10	179	207	197
19. Percentage of WIC Women with Gestational Diabetes, '08 - 10	20	26	30
20. Percentage of WIC Women with Gestational Hypertension, '08 - 10	51	69	50

	Number Per Year (If Available)		
	One	Two	Three

Prevention Agenda Indicators			
1. Percentage of Children Ages 0 - 15 Months with Government Insurance with Recommended Well Visits, 2011			
2. Percentage of Children Ages 3 - 6 Years with Government Insurance with Recommended Well Visits, 2011			
3. Percentage of Children Ages 12 -21 Years with Government Insurance with Recommended Well Visits, 2011			
4. Percentage of Children Ages 0 -19 with Health Insurance, 2010			
5. Percentage of 3rd Graders with Untreated Tooth Decay, '09 - 11			
6. Ratio of 3rd Graders with Untreated Tooth Decay, Low Income Children to Non-Low income Children, '09 - 11			

Other Indicators			
1. Rate of Children Deaths Ages 1 - 4 per 100,000 Population Children Ages 1 - 4, '08 - 10	0	0	2
2. Rate of Children Deaths Ages 5 - 9 per 100,000 Population Children Ages 1 - 4, '08 - 10	0	0	3
3. Rate of Children Deaths Ages 10 - 14 per 100,000 Population Children ages 10 - 14, '08 - 10	0	0	2
4. Rate of Children Deaths Ages 5 - 14 per 100,000 Population Children Ages 5 - 14, '08 - 10	0	0	5
5. Rate of Children Deaths Ages 5 - 19 per 100,000 Population Children Ages 15 - 19 , '08 - 10	2	3	3
6. Rate of Children Deaths Ages 1 - 19 per 100,000 Population Children Ages 1 - 19, '08 - 10	2	3	10
7. Rate of Asthma Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	5	5	7
8. Rate of Asthma Hospitalizations Children Ages 5 - 14 per 10,000 Population Children Ages 5 - 14, '08 - 10	1	7	4
9. Rate of Asthma Hospitalizations Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17, '08 - 10	6	12	12
10. Rate of Gastroenteritis Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	4	5	1
11. Rate of Otitis Media Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	1	2	1
12. Rate of Pneumonia Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	8	10	11
13. Rate of ED Asthma Visits Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	25	30	29
14. Percentage of Children Screened for Lead by Age 9 months			
15. Percentage of Children Screened for Lead by Age 18 months			
16. Percentage of Children Screened for Lead by Age 36 months (at least two screenings)			
17. Rate of Children Ages < 6 with Confirmed Blood Lead Levels $\geq$ 10 mg/dl Cases Per 1,000 Children Tested, '08 - 10	11	6	5
18. Rate of Unintentional Injury Hospitalizations for Children Under Age 10 per 10,000 Population Children Under Age 10, '08 - 10	11	22	11
19. Rate of Unintentional Injury Hospitalizations for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	8	4	8
20. Rate of Unintentional Injury Hospitalizations for Children/Young Adults Ages 15 - 24 per 10,000 Population Ages 15 - 24, '08 - 10	27	43	28
21. Rate of Asthma ED Visits for Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17,	46	67	69

'07 - 09			
22. Percentage of Medicaid Enrollees Ages 2 - 20 with at Least One Dental Visit, '08 - 10			
23 Percentage of 3rd Graders with Dental Caries, '09 - 11			
24. Percentage of 3rd Graders with Dental Sealants, '09 - 11			
25. Percentage of 3rd Graders with Dental Insurance, '09 - 11			
26. Percentage of 3rd Graders with at Least One Dental Visit, '09 - 11			
27. Percentage of 3rd Graders Taking Fluoride Tablets Regularly, '09 - 11			
28. Rate of Caries ED Visits for Children Ages 3 - 5 per 10,000 Population Children Ages 3 - 5, '08 - 10	12	7	4
29. Percentage of WIC Children Ages 2 - 4 Viewing Two Hours TV or Less Per Day, '08 - 10			
	<b>Number Per Year (If Available)</b>		
	<b>One</b>	<b>Two</b>	<b>Three</b>
<b>Prevention Agenda Indicators</b>			
1. Rate of Newly Diagnosed HIV Cases per 100,000 Population , '08 - 10	1	1	4
2. Ratio of Newly Diagnosed HIV Cases Black, non-Hispanic versus White, non-Hispanic, '08 - 10			
<b>Other Indicators</b>			
1. Rate of AIDS Cases per 100,000 Population, '08 - 10	0	1	2
2. Rate of AIDS Deaths per 100,000 Adjusted Population, '08 - 10	2	0	0
	<b>Number Per Year (If Available)</b>		
	<b>One</b>	<b>Two</b>	<b>Three</b>
<b>Prevention Agenda Indicators</b>			
1. Rate of Primary and Secondary Syphilis for Males per 100,000 Male Population, 2010			
2. Rate of Primary and Secondary Syphilis for Females per 100,000 Female Population, 2010			
3. Rate of Gonorrhea Cases for Females Ages 15-44 per 100,000 Female Population Ages 15-44, 2010			
4. Rate of Gonorrhea Cases for Males Ages 15 - 44 per 100,000 Male Population Ages 15-44, 2010			
5. Rate of Chlamydia for Females Ages 15 - 44 per 100,000 Females Ages 15 - 44, '08 - 10			
<b>Other Indicators</b>			
1. Rate of Early Syphilis Cases per 100,000 Population, '08 - 10	0	1	0
2. Rate of Gonorrhea Cases per 100,000 Population, '08 - 10	15	6	12
3. Rate of Gonorrhea Ages 15 - 19 Cases per 100,000 Population Ages 15-19, '08 - 10	0	2	0
4. Rate of Chlamydia Cases All Males per 100,000 Male Population, '08 - 10	17	28	44
5. Rate of Chlamydia Cases Males Ages 15 - 19 Cases per 100,000 Male Population Ages 15-19, '08 - 10	3	6	13
6. Rate of Chlamydia Cases Males Ages 20 - 24 per 100,000 Male Population Ages 20-24, '08 - 10	4	9	17
7. Rate of Chlamydia Cases All Females per 100,000 Female Population, '08 - 10	57	82	120
8. Rate of Chlamydia Cases Females Ages 15- 19 per 100,000 Female Population Ages 15 - 19, '08 - 10	22	27	49
9. Rate of Chlamydia Cases Females Ages 20 - 24 per 100,000 Female Population Ages 20-24, '08 - 10	23	36	52
10. Rate of PID Hospitalizations Females Ages 15 - 44 per 10,000 Female Population Ages 15 - 44, '08 - 10	0	5	1
<b>Number Per Year</b>			

	(If Available)		
	One	Two	Three
Prevention Agenda Indicators			
1. Percent of Children Ages 19 - 35 months with 4:3:1:3:3:1:4, 2011			
2. Percent females 13 - 17 with 3 dose HPV vaccine, 2011			
3. Percent of Adults Ages 65 Plus With Flu Shots Within Last Year, '08/09			
Other Indicators			
1. Rate of Pertussis Cases per 100,000 Population, '08 - 10	0	2	4
2. Rate of Pneumonia/flu Hospitalizations Ages 65 Plus per 100,000 Population Age 65 Plus, '08 - 10	110	124	107
3. Percent of Adults Ages 65 Plus Ever Received a Pneumonia Shot, '08/09			
4. Rate of Mumps Cases per 100,000 Population, '08 - 10	0	0	0
5. Rate of Meningococcal Cases per 100,000 Population, '08 - 10	0	0	0
6. Rate of H Influenza Cases per 100,000 Population, '08 - 10	0	0	2
	Number Per Year (If Available)		
	One	Two	Three
Prevention Agenda Indicators			
1. Rate of Hospital Onset CDIs per 10,000 Patient Days, 2011			
2. Rate of Community Onset, Healthcare Facility Associated CDIs per 10,000 Patient Days, 2011			
	Number Per Year (If Available)		
	One	Two	Three
Prevention Agenda Indicators			
1. Percent of Adults Binge Drinking within the Last Month, '08/09			
2. Percent of Adults with Poor Mental Health (14 or More Days) in the Last Month, '08/09			
3. Rate of Age Adjusted Suicides per 100,000 Adjusted Population, '08 - 10	8	8	11
Other Indicators			
1 Rate of Suicides for Ages 15 - 19 per 100,000 Population Ages 15 - 19, '08 - 10	0	1	2
2. Rate of Self-inflicted Hospitalizations 10,000 Population, '08 - 10	64	72	87
3. Rate of Self-inflicted Hospitalizations for Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	13	15	11
4. Rate of Cirrhosis Deaths per 100,000 Population, '08 - 10	4	3	4
5. Rate of Cirrhosis Hospitalizations per 10,000 Population, '08 - 10	10	14	16
6. Rate of Alcohol-Related Accidents per 100,000 Population, '09 - 11	57	55	55
7. Percentage of Alcohol-Related Crashes to Total Accidents, 09 - 11	5.1%	5.0%	5.3%
8. Rate of Alcohol-Related Injuries and Deaths per 100,000 Population, '08 - 10	44	36	29
9. Rate of Drug-Related Hospitalizations per 10,000 Population, '08 - 10	96	100	106
10. Rate of People Served in Mental Health Outpatient Settings Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011			
11. Rate of People Served in Mental Health Outpatient Settings Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011			

12. Rate of People Served in Mental Health Outpatient Settings Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011			
13. Rate of People Served in Mental Health Outpatient Settings Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011			
14. Rate of People Served in ED for Mental Health Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011			
15. Rate of People Served in ED for Mental Health Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011			
16. Rate of People Served in ED for Mental Health Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011			
17. Rate of People Served in ED for Mental Health Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011			
18. Percentage of Children Ages 9 - 17 with Serious Emotional Disturbances (SED) Served to Total SED Children Ages 9 - 17, 2011			
19. Percentage of Adults Ages 18 - 64 with Serious Mental Illness (SMI) Served, 2011			
20. Percentage of Adults Ages 65 Plus with Serious Mental Illness (SMI) Served, 2011			
Washington County: Revised 4/3/2013 Page 17 of 17	Number Per Year (If Available)		
	One	Two	Three
Other Non-Prevention Agenda Indicators			
1. Rate of Hepatitis A Cases per 100,000 Population, '08 - 10	0	0	0
2. Rate of Acute Hepatitis B Cases per 100,000 Population, '08 - 10	0	0	0
3. Rate of TB Cases per 100,000 Population, '08 - 10	0	0	0
4. Rate of e. Coli 157 Cases per 100,000 Population, '08 - 10	0	1	0
5. Rate of Salmonella Cases per 100,000 Population, '08 - 10	5	7	8
6. Rate of Shigella Cases per 100,000 Population, '08 - 10	0	0	0
7. Rate of Lyme Disease Cases per 100,000 Population, '08 - 10	183	196	135
8. Rate of Confirmed Rabies Cases per 100,000 Population, '08 - 10	6	20	5
9. Rate of Confirmed West Nile Virus Cases (Humans, Horses, Other Animals, Mosquito Pools) per 100,000 Population, '08 - 10	0	0	1

**Table 6:  
Health Indicator Measures and Benchmarks**

	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Disparities					
Prevention Agenda Indicators					
1. Percentage of Overall Premature Deaths (Ages 35 - 64) , '08 - 10	22.0%	22.3%	22.0%	24.3%	21.8%
2. Ratio of Black, Non-Hispanic Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	2.92	N/A	N/A	2.13	1.87
3. Ratio of Hispanic/Latino Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	N/A	N/A	N/A	2.14	1.86
4. Rate of Adult Age-Adjusted Preventable Hospitalizations per 100,000 Population (Ages 18 Plus), '08 - 10	139.1	147.3	138.9	155.0	133.3
5. Ratio of Black, Non-Hispanic Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	0.32	N/A	N/A	2.09	1.85
6. Ratio of Hispanic/Latino Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	0.26	N/A	N/A	1.46	1.38
7. Percentage of Adults ( Ages 18 - 64) with Health Insurance, '08/09	83.6%	83.2%	85.7%	83.1%	100.0%
8. Percentage of Adults with Regular Health Care Provider, '08/09	81.8%	86.6%	N/A	83.0%	90.8%
Other Disparity Indicators					
1. Rate of Total Deaths per 100,000 Population, '08 - 10	937.6	848.2	842.2	748.6	N/A
2. Rate of Total Deaths per 100,000 Adjusted Population, '08 - 10	766.6	721.0	701.4	662.8	N/A
3. Rate of Emergency Department Visits per 10,000 Population, '08 - 10	3,158.8	3,673.1	3,534.4	3,813.6	N/A
4. Rate of Emergency Department Visits per 10,000 Adjusted Population, '08 - 10	3,155.9	3,682.4	3,522.6	3,304.9	N/A
5. Rate of Total Hospital Discharges per 10,000 Population, '08 - 10	1,191.2	1,137.5	1,223.2	1,290.5	N/A
6. Rate of Total Hospital Discharges per 10,000 Adjusted Population, '08 - 10	1,110.7	1,080.8	1,162.6	1,242.5	N/A
7. Percentage of Adults (18 and Older) Who Did Not Receive Care Due to Costs, '08/09	13.4%			13.8%	N/A
8. % of Adults (18 and Older) with Poor Physical Health, '08/09	10.2%	11.2%	9.9%	9.8%	N/A
9. % of Adults (18 and Older) with Physical Limitations, '08/09	18.6%	23.3%	21.2%	20.2%	N/A
10. % of Adults (18 and Older) with Health Problems that Need Special Equipment, '08/09	7.4%	8.2%	7.7%	7.8%	N/A
11. Percentage of Adults (18 and Older) with Disabilities, '08/09	21.4%	25.2%	22.9%	22.5%	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Injuries, Violence, and Occupational Health					



<b>Prevention Agenda Indicators</b>					
1. Rate of Hospitalizations due to Falls for Ages 65 Plus per 10,000 Population, '08 - 10	218.9	208.4	215.8	202.1	<b>204.6</b>
2. Rate of ED Visits due to Falls for Children Ages 1 - 4 per 10,000 Population Children Ages 1 - 4, '08 - 10	505.0	515.5	511.9	476.4	<b>429.1</b>
3. Rate of Assault-Related Hospitalizations per 10,000 Population, '08 - 10	1.6	1.6	2.7	4.7	<b>4.3</b>
4. Ratio of Black, Non-Hispanic Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	N/A	N/A	N/A	7.28	<b>6.69</b>
5. Ratio of Hispanic/Latino Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	N/A	N/A	N/A	3.00	<b>2.75</b>
6. Ratio of Assault-Related Hospitalizations for Low-Income versus non-Low Income Zip Codes, '08 - 10	N/A	N/A	N/A	3.26	<b>2.92</b>
7. Rate of ED Occupational Injuries Among Working Adolescents Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	51.1	56.1	51.8	36.7	<b>33.0</b>

<b>Other Indicators</b>					
1. Rate of Hospitalizations for Falls for Children Ages Under 10 per 10,000 Population Children Ages Under 10 , '08 - 10	3.5	6.5	<b>8.5</b>	10.0	N/A
2. Rate of Hospitalizations for Falls for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	3.5	4.2	<b>6.1</b>	7.1	N/A
3. Rate of Hospitalizations for Falls for Individuals Ages 15 - 24 per 10,000 Population Individuals Ages 15 - 24, '08 - 10	9.0	6.3	<b>6.3</b>	6.9	N/A
4. Rate of Hospitalizations for Falls for Adults Ages 25 - 64 per 10,000 Population Adults Ages 25 - 64, '08 - 10	17.9	17.7	<b>18.7</b>	18.7	N/A
5. Rate of Violent Crimes per 100,000 Population, '07 - 11	158.9	128.0	<b>251.3</b>	395.7	N/A
6. Rate of Property Crimes per 100,000 Population, '07 - 11	1,249.1	1,669.5	<b>2,088.7</b>	1,938.4	N/A
7. Rate of Total Crimes per 100,000 Population, '07 - 11	1,408.0	1,797.4	<b>2,340.0</b>	2,334.1	N/A
8. Rate of Malignant Mesothelioma Cases, Ages 15 Plus, per 100,000 Population Ages 15 Plus, '07 - 09	1.9	1.5	<b>1.7</b>	<b>1.3</b>	N/A
9. Rate of Pneumonconsis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	2.1	1.8	<b>1.9</b>	1.4	N/A
10. Rate of Asbestosis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	2.3	4.8	<b>2.1</b>	1.3	N/A
11. Rate of Work-Related Hospitalizations, Employed Ages 16 Plus per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	22.4	19.1	<b>21.1</b>	16.8	N/A
12. Rate of Elevated Blood Lead Levels Ages 16 Plus Employed per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	3.0	2.6	<b>2.4</b>	2.3	N/A
13. Rate of Total Motor Vehicle Crashes per 100,000 Population, '09 - 11	1,706.3	2,126.9	<b>2,104.5</b>	1,607.0	N/A
14. Rate of Pedestrian-Related Accidents per 100,000 Population, '09 - 11	19.5	26.0	<b>45.0</b>	82.4	N/A
15. Rate of Speed-Related Accidents per 100,000 Population, '09 - 11	246.2	310.9	<b>225.1</b>	146.4	N/A
16. Rate of Motor Vehicle Accident Deaths per 100,000 Population, '08 - 10	13.8	10.1	<b>8.2</b>	6.2	N/A
17. Rate of TBI Hospitalizations per 10,000 Population, '08 - 10	8.0	7.2	<b>10.0</b>	9.9	N/A
18. Rate of Unintentional Injury Hospitalizations per 10,000 Population, '08 - 10	84.7	70.7	<b>72.7</b>	69.2	N/A
19. Rate of Unintentional Injury Hospitalizations Ages 14 and Under per 10,000 Population Ages 14 and Under , '08 - 10	20.5	16.9	<b>21.0</b>	24.5	N/A
20. Rate of Unintentional Injury Hospitalizations Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 - 10	304.3	273.3	<b>276.6</b>	260.9	N/A
21. Rate of Poisoning Hospitalizations per 10,000 Population, '08 - 10	13.2	11.6	<b>10.3</b>	10.5	N/A

	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Outdoor Air Quality					
1. Number of Days with Unhealthy Ozone, 2007	0	9	88	122	0
2. Number of Days with Unhealthy Particulated Matter, 2007	0	4	32	69	0
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Built Environment					
1. Percentage of the Population that Live in Jurisdictions that Adopted Climate Smart Communities Pledge, 2012	0.0%	18.5%	46.1%	26.7%	32.0%
2. Percentage of Commuters Who Use Alternative Modes of Transportation to Work, '07 - 11	19.5%	18.1%	22.8%	44.6%	49.2%
3. Percentage of Population with Low-Income and Low-Access to a Supermarket or Large Grocery Store, 2010	4.0%	4.6%	4.2%	2.5%	2.2%
4. Percentage of Homes in Vulnerable Neighborhoods that have Fewer Asthma Triggers During Home Revisits, '08 - 11	N/A	N/A	N/A	12.9%	20.0%
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Water Quality					
1. Percentage of Residents Served by Community Water Systems with Optimally Fluoridated Water, 2012	28.9%	42.4%	47.4%	71.4%	78.5%
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percentage of Adults Ages 18 Plus Who are Obese, '08/09	29.3%	N/A	N/A	23.1%	23.0%
2. Percentage of Public School Children Who are Obese, '10 - 12	20.9%	N/A	0.0%	N/A	16.7%
Other Indicators					
1. Percentage of Total Students Overweight, '08 - 10	20.4%	N/A	N/A	N/A	N/A
2. Percentage of Elementary Students Overweight, Not Obese, '08 - 10	9.3%	N/A	N/A	N/A	N/A
3. Percentage of Elementary Students Obese, '08 - 10	21.1%	N/A	N/A	N/A	N/A
4. Percentage of Middle and High School Students Overweight, Not Obese, '08 - 10	15.3%	N/A	N/A	N/A	N/A
5. Percentage of Middle and High School Students Obese, '08 - 10	19.5%	N/A	N/A	N/A	N/A
6. Percentage of WIC Children Ages 2 - 4 Obese, '08 - 10	53.1%	45.3%	45.7%	43.4%	N/A
7. Percentage of Age Adjusted Adults (Ages 18 Plus) Overweight or Obese, '08/09	67.8%	N/A	N/A	59.3%	N/A
8. Percentage of Age Adjusted Adults (Ages 18 Plus) Who Did Not Participate in Leisure Activities Last 30 Days, '08/09	76.6%	N/A	N/A	76.3%	N/A
9. Number of Recreational and Fitness Facilities per 100,000	12.7	13.3	12.4	11.0	N/A

Population, 2009					
10. Percentage of Age Adjusted Adults (Ages 18 Plus) Eating Five or More Vegetables per Day, '08/09	24.9%	N/A	N/A	27.1%	N/A
11. Percentage of Age Adjusted Adults (Ages 18 Plus) with Cholesterol Check within the Last Five Years, '08/09	70.1%	N/A	N/A	77.3%	N/A
12. Percentage of Age Adjusted Adults (18 Plus) Ever Diagnosed with High Blood Pressure, '08/09	29.5%	N/A	N/A	25.7%	N/A
13. Percentage of Age Adjusted Adults (18 Plus) with Physician Diagnoses Angina, Heart Attack, or Stroke, '08/09	8.9%	N/A	N/A	7.6%	N/A
14. Rate of Cardiovascular Disease Deaths per 100,000 Population, '08 - 10	276.5	280.8	302.9	289.2	N/A
15. Rate of Cardiovascular Premature Deaths ( Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	40.8	40.5	39.4	41.3	N/A
16. Rate of Pretransport Deaths per 100,000 Popuation, '08 - 10	157.9	146.7	155.9	144.1	N/A
17. Rate of Cardiovascular Hospitalizations per 10,000 Population, '08 - 10	173.3	169.5	184.6	183.3	N/A
18. Rate of Diseases of the Heart Deaths per 100,000 Population, '08 - 10	209.2	219.5	243.6	239.7	N/A
19. Rate of Diseases of the Heart Premature Deaths ( Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	32.3	33.8	32.2	33.7	N/A
20. Rate of Disease of the Heart Transport Deaths per 100,000 Population, '08 - 10	124.0	119.0	129.7	125.3	N/A
21. Rate of Disease of the Heart Hospitalizations per 10,000 Population, '08 - 10	124.3	118.9	128.4	125.7	N/A
22. Rate of Coronary Heart Diseases Deaths per 100,000 Population, '08 - 10	132.4	151.3	180.0	195.6	N/A
23. Rate of Coronary Heart Diseases Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	22.8	24.6	24.8	27.9	N/A
24. Rate of Coronary Heart Disease Transport Deaths per 100,000 Population, '08 - 10	74.2	83.6	99.0	105.2	N/A
25. Rate of Coronary Heart Disease Hospitalizations per 10,000 Population, '08 - 10	49.4	44.7	51.6	52.3	N/A
26. Rate of Congestive Heart Failure Deaths per 100,000 Population, '08 - 10	19.6	15.7	19.8	13.3	N/A
27. Rate of Congestive Heart Failure Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	1.1	0.6	0.8	0.6	N/A
28. Rate of Congestive Heart Failure Transport Deaths per 100,000 Population, '08 - 10	13.8	8.8	10.9	7.2	N/A
29. Rate of Congestive Heart Failure Hospitalizations per 10,000 Population, '08 - 10	29.7	29.3	32.2	32.3	N/A
30. Rate of Cerebrovascular (Stroke) Deaths per 100,000 Population, '08 - 10	41.3	40.2	39.3	30.5	N/A
31. Rate of Cerebrovascular (Stroke) Hospitalizations per 10,000 Population, '08 - 10	25.0	26.4	29.8	27.8	N/A
32. Rate of Hypertension Hospitalizations (Ages 18 Plus) per 100,000 Population Ages 18 Plus, '08 - 10	2.1	2.5	4.1	6.2	N/A
33. Rate of Diabetes Deaths per 100,000 Population, '08 - 10	27.5	17.8	17.7	18.6	N/A
34. Rate of Diabetes Hospitalizations (Primary Diagnosis) per 10,000 Population, '08 - 10	13.4	14.1	15.5	20.3	N/A
35. Rate of Diabetes Hospitalizations (Any Diagnosis) per 10,000 Population, '08 - 10	254.7	228.1	228.9	248.7	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percentage of Adults Ages 18 Plus Who Smoke '08/09	23.5%	21.4%	18.5%	16.8%	15.0%

Other Indicators					
1. Rate of Chronic Lower Respiratory Disease Deaths per 100,000 Population, '08 - 10	59.9	59.1	46.0	104.1	N/A
2. Rate of Chronic Lower Respiratory Disease Hospitalizations per 10,000 Population, '08 - 10	47.0	43.7	35.2	39.3	N/A
3. Rate of Asthma Deaths per 100,000 Population, '08 - 10	0.0	0.8	0.9	1.3	N/A
4. Rate of Asthma Hospitalizations per 10,000 Population, '08 - 10	13.6	11.8	12.4	20.3	N/A
5. Rate of Asthma Hospitalizations, Ages 25 - 44, per 10,000 Population Ages 25 - 44, '08 - 10	2.5	2.2	2.0	3.0	N/A
6. Rate of Asthma Hospitalizations, Ages 45 - 64, per 10,000 Population Ages 45 - 64, '08 - 10	5.5	3.7	3.5	5.8	N/A
7. Rate of Asthma Hospitalizations, Ages 65 Plus, per 10,000 Population Ages 65 Plus, '08 - 10	3.3	2.9	2.7	4.3	N/A
8. Percentage of Adults with Asthma, '08/09	9.6%	12.0%	N/A	9.7%	N/A
9. Rate of Lung and Bronchus Deaths per 100,000 Population, '07 - 09	65.9	64.5	57.2	32.7	N/A
10. Rate of Lung and Bronchus Cases per 100,000 Population, '07- 09	112.7	94.4	83.9	69.8	N/A
11. Number of Registered Tobacco Vendors per 100,000 Population, '09 - 10	79.5	101.6	94.0	102.1	N/A
12. Percentage of Vendors with Sales to Minors Violations, '09 - 10	6.0%	3.9%	5.1%	7.4%	N/A
13. Percentage of Vendors with Complaints, '09 - 10	0.0%	0.0%	3.4%	15.3%	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percentage of Adults Ages 50 - 75 Who Received Colorectal Screenings Based on Recent Guidelines, '08/09	67.0%	69.9%	N/A	66.3%	71.4%
2. Rate of Asthma ED Visits per 10,000 Population, '08 - 10	39.68	53.2	51.1	83.7	75.1
3. Rate of Asthma ED Visits Ages 0 - 4, per 10,000 Population Ages, 0 - 4, '08 - 10	85.3	94.9	122.3	221.4	196.5
4. Rate of Short-term Diabetes Hospitalizations for Ages 6 - 17 per 10,000 Population, Ages 6 - 17, '08 - 10	7.0	4.9	3.0	3.2	3.06
5. Rate of Short-term Diabetes Hospitalizations for Ages 18 Plus per 10,000 Population, Ages 18 Plus, '08 - 10	3.0	4.4	4.8	5.6	4.86
6. Rate of Age Adjusted Heart Attack Hospitalizations per 10,000 Population, 2010	15.5	16.7	16.0	15.5	14.4
Other Indicators					
1. Rate of Asthma ED Visits for Ages 18 - 64 per 10,000 Population Ages 18 - 64, '08 - 10	41.1	57.1	49.3	73.9	N/A
2. Rate of Asthma ED Visits for Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 10	13.9	20.7	18.6	32.1	N/A
3. Rate of All Cancer Cases per 100,000 Population, '07 - 09	657.8	614.3	600.1	536.5	N/A
4. Rate of all Cancer Deaths per 100,000 Population, '07 - 09	234.5	218.5	204.1	179.9	N/A
5. Rate of Female Breast Cancer Cases per 100,000 Female Population, '07 -09	85.6	78.8	83.9	75.7	N/A
6. Rate of Female Late Stage Breast Cancer Cases per 100,000 Female Population, '07 - 09	3.7	4.2	4.2	4.1	N/A
7. Rate of Female Breast Cancer Deaths per 100,000 Female Population, '07	17.0	14.0	14.6	13.7	N/A
8. Percentage of Women Ages 40 Plus With Mammogram within Last Two Years, '08/ 09	76.3%	79.8%	N/A	79.7%	N/A

9. Rate of Cervix and Uteric Cancer Cases per 100,000 Female Population, '07 - 09	7.4	4.1	4.0	4.6	N/A
10. Rate of Cervix and Uteric Cancer Deaths per 100,000 Female Population, '07 - 09	1.1	1.2	1.1	1.4	N/A
11. Percentage of Women Ages 18 Plus with a Pap Smear within the Last Three Years, '08/ '09	82.3%	82.4%	N/A	82.7%	N/A
12. Rate of Ovarian Cancer Cases per 100,000 Female Population, '07 - 09	9.0	8.0	8.4	7.8	N/A
13. Rate of Ovarian Cancer Deaths per 100,000 Female Population, '07 - 09	6.4	6.2	5.6	4.9	N/A
14. Rate of Colon and Rectum Cancer Cases per 100,000 Population, '07 - 09	47.3	54.3	53.9	50.4	N/A
15. Rate of Colon and Rectum Cancer Deaths per 100,000 Population, '07 - 09	20.2	20.5	18.5	10.6	N/A
16. Percentage of Adults Ages 50 Plus with Home Blood Stool Test within the Last Two Years, '08/09	18.2%	20.1%	20.1%	19.5%	N/A
17. Percentage of Adults Ages 50 Plus with Sigmoidoscopy or Colonoscopy within Last Ten Years, '08/09	59.9%	62.9%	62.9%	61.8%	N/A
18. Rate of Prostate Cancer Deaths per 100,000 Male Population, '07 - 09	13.8	8.3	9.5	9.0	N/A
19. Rate of Prostate Cancer Cases per 100,000 Male Population, '07 - 09	102.6	90.9	91.5	82.1	N/A
20. Rate of Prostate Cancer Late Stage Cancer Cases per 100,000 Male Population, '07 - 09	3.7	2.8	3.3	3.2	N/A
21. Percentage of Males, Ages 40 Plus with a Digital Rectal Exam within Last Two Years, '08/09	46.7%	53.4%	57.5%	56.7%	N/A
22. Percentage of Males, Ages 40 Plus with a Prostate Antigen Test within Last Two Years, '08/09	35.4%	46.6%	54.2%	59.4%	N/A
23. Rate of Melanoma Cancer Deaths per 100,000 Population, '07 - '09	3.2	3.7	3.1	2.3	N/A
24. Percentage of Medicaid Enrollees with at Least One Preventive Dental Visit within the Year, '08 - 10	28.4%	27.0%	29.5%	31.3%	N/A
25. Percentage of Age Adjusted Adults with a Dental Visit Within the Last 12 Months, '08/09	23.6%	25.1%	22.8%	25.7%	N/A
26. Oral Cavity and Pharynx Cancer Deaths per 100,000 Population, '07-09	2.1	2.3	2.4	2.3	N/A
27. Oral Cavity and Pharynx Cancer Deaths, Adults Ages 45 - 74, per 100,000 Population, Ages 45 - 74, '07 - 09	4.4	4.4	4.2	4.4	N/A
28. Oral Cavity and Pharynx Cancer Cases per 100,000 Population, '07 - 09	12.2	14.2	12.7	11.5	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Focus Area: Maternal and Infant Health					
Prevention Agenda Indicators					
1. Percentage Preterm Births < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	9.9%	10.5%	11.2%	12.0%	10.2%
2. Ratio of Preterm Births (< 37 wks.) Black/NH to White/NH, '08 - 10	N/A	N/A	N/A	1.61	1.42
3. Ratio of Preterm Births (< 37 wks.) Hisp/Latino to White/NH, '08 - 10	N/A	N/A	N/A	1.25	1.12
4. Ratio of Preterm Births (< 37 wks.) Medicaid to Non-Medicaid, '08 - 10	1.21	N/A	N/A	1.10	1.00
5. Rate of Maternal Mortality per 100,000 Births, '08 - 10	0.0	5.7	17.6	23.3	19.7

6. Percentage of Live Birth Infants Exclusively Breastfed in Delivery Hospital, '08 - 10	60.0%	63.0%	N/A	42.5%	<b>48.1%</b>
7. Ratio of Infants Exclusively Breastfed in Delivery Hospital Black, non-Hispanic to White, non-Hispanic, '08 - 10	N/A	N/A	N/A	0.5	<b>0.57</b>
8. Ratio of Infants Exclusively Breastfed in Delivery Hospital Hispanic/Latino to White, non-Hispanic, '08 - 10	1.1	N/A	N/A	0.6	<b>0.64</b>
9. Ratio of Infants Exclusively Breastfed in Delivery Hospital Medicaid to Non-Medicaid Births, '08 - 10	0.9	N/A	N/A	0.6	<b>0.66</b>

Other Indicators					
1. Percentage Preterm Births < 32 weeks of Total Births Where Gestation Period is Known, '08 - 10	6.0%	5.9%	<b>5.8%</b>	6.0%	N/A
2. Percentage Preterm Births 32 to < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	7.9%	8.5%	<b>9.3%</b>	9.9%	N/A
3. Percentage of Total Births with Weights Less Than 1,500 grams, '08 - 10	1.7%	1.3%	<b>1.4%</b>	1.5%	N/A
4. Percentage of Singleton Births with Weights Less Than 1,500 grams, '08 - 10	1.1%	0.9%	<b>1.0%</b>	1.1%	N/A
5. Percentage of Total Births with Weights Less Than 2,500 grams, '08 - 10	7.7%	7.2%	<b>7.7%</b>	8.2%	N/A
6. Percentage of Singleton Births with Weights Less Than 2,500 grams, '08 - 10	5.6%	5.4%	<b>5.7%</b>	6.2%	N/A
7. Percentage of Total Births for Black, Non-Hispanic, with Weights Less than 2,500 Grams, '08 - 10	N/A	N/A	<b>13.3%</b>	13.0%	N/A
8. Percentage of Total Births for Hispanic/Latino, with Weights Less than 2,500 Grams, '08 - 10	N/A	N/A	<b>7.5%</b>	7.8%	N/A
9. Infant Mortality Rate per 1,000 Live Births, '08 - 10	5.8	N/A	<b>5.7</b>	5.3	N/A
10. Infant Mortality Rate for Black, Non-Hispanic per 1,000 Births, '08 - 10	N/A	N/A	<b>14.9</b>	11.0	N/A
11. Infant Mortality Rate for Hispanic/Latino per 1,000 Births, '08 - 10	N/A	N/A	<b>5.3</b>	4.6	N/A
12. Rate of Deaths (28 Weeks Gestation to Seven Days) per 1,000 Live Births and Perinatal Deaths, '08 - 10	6.3	4.6	<b>5.7</b>	5.7	N/A
13. Percentage Early Prenatal Care of Total Births Where Prenatal Care Status is Known, '08 - 10	61.7%	75.4%	<b>75.2%</b>	72.8%	N/A
14. Percentage Early Prenatal Care for Black, Non-Hispanic, '08 - 10	N/A	N/A	<b>61.1%</b>	61.7%	N/A
15. Percentage Early Prenatal Care for Hispanic/Latino, '08 - 10	N/A	N/A	<b>63.0%</b>	65.1%	N/A
16. Percentage APGAR Scores of Less Than Five at Five Minute Mark of Births Where APGAR Score is Known, '08 - 10	1.3%	0.8%	<b>0.7%</b>	0.7%	N/A
17. Rate of Newborn Drug Related Hospitalizations per 10,000 Births, '08 - 10	52.9	48.7	<b>75.1</b>	61.9	N/A
18. Percentage WIC Women Breastfed at Six months, '08 - 10	16.6%	18.7%	N/A	<b>39.7%</b>	N/A
19. Percentage Infants Receiving Any Breast Milk in Delivery Hospital, '08 - 10	63.4%	51.0%	<b>N/A</b>	71.0%	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark

Prevention Agenda Indicators					
1. Percent of Births within 24 months of Previous Pregnancy, '08 - 10	24.2%	23.4%	21.1%	18.0%	<b>17.0%</b>
2. Rate of Pregnancies Ages 15 - 17 year per 1,000 Females Ages 15-17, '08 - 10	23.7	18.8	20.4	31.1	<b>25.6</b>
3. Ratio of Pregnancy Rates for Ages 15 - 17 Black, non-Hispanic to White, non-Hispanic, '08 - 10	0.88	N/A	N/A	5.75	<b>4.90</b>
4. Ratio of Pregnancy Rates for Ages 15 - 17 Hispanic/Latino to	2.15	N/A	N/A	5.16	<b>4.10</b>

White, non-Hispanic, '08 - 10					
5. Percent of Unintended Births to Total Births, 2011	35.7%	29.8%	28.4%	26.4%	<b>24.2%</b>
6. Ratio of Unintended Births Black, non-Hispanic to White, non-Hispanic, '08 - 10	N/A	N/A	N/A	2.11	<b>1.88</b>
7. Ratio of Unintended Births Hispanic/Latino to White, non-Hispanic, '08 - 10	N/A	N/A	N/A	1.59	<b>1.36</b>
8. Ratio of Unintended Births Medicaid to Non-Medicaid, '08 - 10	1.79	N/A	N/A	1.71	<b>1.56</b>
9. Percentage of Women Ages 18- 64 with Health Insurance, '08/09	86.3%	88.4%	N/A	86.1%	<b>100.0%</b>
Other Indicators					
1. Rate of Total Births per 1,000 Females Ages 15-44, '08 - 10	56.2	53.3	<b>58.2</b>	60.9	N/A
2. Percent Multiple Births of Total Births, '08 - 10	4.0%	3.7%	<b>4.2%</b>	3.9%	N/A
3. Percent C-Sections to Total Births, '08 - 10	33.6%	34.8%	<b>36.1%</b>	34.4%	N/A
4. Rate of Total Pregnancies per 1,000 Females Ages 15-44, '08 - 10	71.3	72.7	<b>77.0</b>	93.6	N/A
5. Rate of Births Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	0.4	0.3	<b>0.3</b>	0.4	N/A
6. Rate of Pregnancies Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	0.7	0.6	<b>0.8</b>	1.4	N/A
7. Rate of Births Ages 15 - 17 per 1,000 Females Ages 15-17, '08 - 10	13.0	8.7	<b>10.0</b>	12.1	N/A
8. Rate of Births Ages 15 - 19 per 1,000 Females Ages 15-19, '08 - 10	33.3	22.4	<b>20.8</b>	24.0	N/A
9. Rate of Pregnancies Ages 15 - 19 per 1,000 Females Ages 5-19, '08 - 10	50.8	40.7	<b>37.4</b>	53.5	N/A
10. Rate of Births Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	67.8	42.3	<b>35.4</b>	40.3	N/A
11. Rate of Pregnancies Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	96.8	72.4	<b>60.3</b>	84.1	N/A
12. Percent Total Births to Women Ages 35 Plus, '08 - 10	10.4%	14.4%	<b>19.0%</b>	19.4%	N/A
13. Rate of Abortions Ages 15 - 19 per 100 Live Births, Mothers Ages 15-19, '08 - 10	4.9	5.3	<b>5.2</b>	7.6	N/A
14. Rate of Abortions All Ages per 100 Live Births to All Mothers, '08 - 10	22.1	24.5	<b>27.7</b>	46.6	N/A
15. Percentage of WIC Women Pre-pregnancy Underweight, '08 - 10	5.8%	N/A	N/A	<b>4.6%</b>	N/A
16. Percentage of WIC Women Pre-pregnancy Overweight but not Obese, ' 08 - 10	25.4%	N/A	N/A	<b>26.6%</b>	N/A
17. Percentage of WIC Women Pre-pregnancy Obese, '08 - 10	30.2%	N/A	N/A	<b>23.4%</b>	N/A
18. Percentage of WIC Women with Gestational Weight Gain Greater than Ideal, '08 - 10	51.4%	N/A	N/A	<b>41.8%</b>	N/A
19. Percentage of WIC Women with Gestational Diabetes, '08 - 10	6.7%	N/A	N/A	<b>5.5%</b>	N/A
20. Percentage of WIC Women with Gestational Hypertension, '08 - 10	14.9%	N/A	N/A	<b>7.2%</b>	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percentage of Children Ages 0 - 15 Months with Government Insurance with Recommended Well Visits, 2011	86.4%	88.7%	84.9%	82.8%	<b>77.0%</b>
2. Percentage of Children Ages 3 - 6 Years with Government Insurance with Recommended Well Visits, 2011	81.1%	81.9%	80.3%	82.8%	<b>77.0%</b>

3. Percentage of Children Ages 12 -21 Years with Government Insurance with Recommended Well Visits, 2011	58.0%	59.3%	59.3%	61.0%	<b>77.0%</b>
4. Percentage of Children Ages 0 -19 with Health Insurance, 2010	94.6%	94.9%	95.0%	94.9%	<b>100.0%</b>
5. Percentage of 3rd Graders with Untreated Tooth Decay, '09 - 11	38.1%	N/A	24.0%	N/A	<b>21.6%</b>
6. Ratio of 3rd Graders with Untreated Tooth Decay, Low Income Children to Non-Low income Children, '09 - 11	0.92	N/A	2.50	N/A	<b>2.21</b>
<b>Other Indicators</b>					
1. Rate of Children Deaths Ages 1 - 4 per 100,000 Population Children Ages 1 - 4, '08 - 10	25.7	27.9	<b>22.7</b>	20.3	N/A
2. Rate of Children Deaths Ages 5 - 9 per 100,000 Population Children Ages 1 - 4, '08 - 10	29.9	17.9	<b>10.5</b>	10.4	N/A
3. Rate of Children Deaths Ages 10 - 14 per 100,000 Population Children ages 10 - 14, '08 - 10	17.7	15.3	<b>13.0</b>	12.8	N/A
4. Rate of Children Deaths Ages 5 - 14 per 100,000 Population Children Ages 5 - 14, '08 - 10	23.4	16.5	<b>11.8</b>	11.6	N/A
5. Rate of Children Deaths Ages 5 - 19 per 100,000 Population Children Ages 15 - 19 , '08 - 10	62.0	39.5	<b>37.8</b>	37.2	N/A
6. Rate of Children Deaths Ages 1 - 19 per 100,000 Population Children Ages 1 - 19, '08 - 10	35.7	25.6	<b>21.8</b>	20.8	N/A
7. Rate of Asthma Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	17.3	27.9	<b>36.1</b>	58.8	N/A
8. Rate of Asthma Hospitalizations Children Ages 5 - 14 per 10,000 Population Children Ages 5 - 14, '08 - 10	5.6	8.1	<b>11.2</b>	20.9	N/A
9. Rate of Asthma Hospitalizations Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17, '08 - 10	7.7	12.1	<b>16.1</b>	29.0	N/A
10. Rate of Gastroenteritis Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	10.2	8.7	<b>10.8</b>	15.7	N/A
11. Rate of Otitis Media Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	4.1	2.8	<b>2.7</b>	3.3	N/A
12. Rate of Pneumonia Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	29.5	30.2	<b>37.5</b>	44.6	N/A
13. Rate of ED Asthma Visits Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	85.3	94.9	<b>122.3</b>	221.4	N/A
14. Percentage of Children Screened for Lead by Age 9 months	1.7%	1.9%	<b>2.9%</b>	6.8%	N/A
15. Percentage of Children Screened for Lead by Age 18 months	56.8%	54.1%	<b>65.4%</b>	69.5%	N/A
16. Percentage of Children Screened for Lead by Age 36 months (at least two screenings)	32.1%	34.1%	<b>45.2%</b>	52.9%	N/A
17. Rate of Children Ages < 6 with Confirmed Blood Lead Levels >= 10 mg/dl Cases Per 1,000 Children Tested, '08 - 10	26.1	22.5	<b>23.3</b>	15.8	N/A
18. Rate of Unintentional Injury Hospitalizations for Children Under Age 10 per 10,000 Population Children Under Age 10, '08 - 10	22.1	18.1	<b>22.0</b>	26.2	N/A
19. Rate of Unintentional Injury Hospitalizations for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	17.7	14.8	<b>19.3</b>	21.1	N/A
20. Rate of Unintentional Injury Hospitalizations for Children/Young Adults Ages 15 - 24 per 10,000 Population Ages 15 - 24, '08 - 10	38.5	30.4	<b>32.7</b>	31.9	N/A
21. Rate of Asthma ED Visits for Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17, '07 - 09	48.0	65.1	<b>77.9</b>	142.4	N/A
22. Percentage of Medicaid Enrollees Ages 2 - 20 with at Least One Dental Visit, '08 - 10	45.0%	39.5%	N/A	<b>40.8%</b>	N/A
23. Percentage of 3rd Graders with Dental Caries, '09 - 11	43.6%	N/A	N/A	N/A	N/A
24. Percentage of 3rd Graders with Dental Sealants, '09 - 11	17.2%	N/A	N/A	N/A	N/A
25. Percentage of 3rd Graders with Dental Insurance, '09 - 11	81.3%	N/A	N/A	N/A	N/A



26. Percentage of 3rd Graders with at Least One Dental Visit, '09 - 11	80.4%	N/A	N/A	N/A	N/A
27. Percentage of 3rd Graders Taking Fluoride Tablets Regularly, '09 - 11	61.2%	N/A	N/A	N/A	N/A
28. Rate of Caries ED Visits for Children Ages 3 - 5 per 10,000 Population Children Ages 3 - 5, '08 - 10	39.2	29.7	69.9	65.8	N/A
29. Percentage of WIC Children Ages 2 - 4 Viewing Two Hours TV or Less Per Day, '08 - 10	92.0%	83.3%	N/A	78.6%	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Rate of Newly Diagnosed HIV Cases per 100,000 Population , '08 - 10	3.2	3.0	7.4	21.4	14.7
2. Ratio of Newly Diagnosed HIV Cases Black, non-Hispanic versus White, non-Hispanic, '08 - 10	N/A	N/A	N/A	N/A	45.7
Other Indicators					
1. Rate of AIDS Cases per 100,000 Population, '08 - 10	1.0	2.1	5.6	17.6	N/A
2. Rate of AIDS Deaths per 100,000 Adjusted Population, '08 - 10	1.1	0.5	1.7	5.7	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Rate of Primary and Secondary Syphilis for Males per 100,000 Male Population, 2010	0.0	1.7	2.4	11.2	10.1
2. Rate of Primary and Secondary Syphilis for Females per 100,000 Female Population, 2010	0.0	0.3	0.2	0.5	0.4
3. Rate of Gonorrhea Cases for Females Ages 15-44 per 100,000 Female Population Ages 15-44, 2010	74.2	50.4	147.0	203.4	183.1
4. Rate of Gonorrhea Cases for Males Ages 15 - 44 per 100,000 Male Population Ages 15-44, 2010	15.2	18.8	111.3	221.7	199.5
5. Rate of Chlamydia for Females Ages 15 - 44 per 100,000 Females Ages 15 - 44, '08 - 10	1113.7	775.5	1167.9	1619.8	1458.0
Other Indicators					
1. Rate of Early Syphilis Cases per 100,000 Population, '08 - 10	0.5	1.5	2.5	12.8	N/A
2. Rate of Gonorrhea Cases per 100,000 Population, '08 - 10	17.5	14.1	55.7	89.7	N/A
3. Rate of Gonorrhea Ages 15 - 19 Cases per 100,000 Population Ages 15-19, '08 - 10	15.5	40.4	210.3	335.5	N/A
4. Rate of Chlamydia Cases All Males per 100,000 Male Population, '08 - 10	91.2	75.7	178.9	305.1	N/A
5. Rate of Chlamydia Cases Males Ages 15 - 19 Cases per 100,000 Male Population Ages 15-19, '08 - 10	308.1	220.7	586.9	1,013.5	N/A
6. Rate of Chlamydia Cases Males Ages 20 - 24 per 100,000 Male Population Ages 20-24, '08 - 10	409.3	461.9	920.6	1,410.1	N/A
7. Rate of Chlamydia Cases All Females per 100,000 Female Population, '08 - 10	283.9	262.3	426.2	644.6	N/A
8. Rate of Chlamydia Cases Females Ages 15- 19 per 100,000 Female Population Ages 15 - 19, '08 - 10	1,699.6	1,415.8	2,334.5	3,587.6	N/A
9. Rate of Chlamydia Cases Females Ages 20 - 24 per 100,000 Female Population Ages 20-24, '08 - 10	1,514.5	1,606.0	2,200.4	3,114.6	N/A
10. Rate of PID Hospitalizations Females Ages 15 - 44 per 10,000 Female Population Ages 15 - 44, '08 - 10	1.8	2.0	2.5	3.7	N/A

	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percent of Children Ages 19 - 35 months with 4:3:1:3:3:1:4, 2011	58.3%	57.6%	47.6%	N/A	80.0%
2. Percent females 13 - 17 with 3 dose HPV vaccine, 2011	34.2%	31.2%	26.0%	N/A	50.0%
3. Percent of Adults Ages 65 Plus With Flu Shots Within Last Year, '08/09	74.0%	N/A	N/A	75.0%	75.1%
Other Indicators					
1. Rate of Pertussis Cases per 100,000 Population, '08 - 10	3.2	6.7	4.3	3.0	N/A
2. Rate of Pneumonia/flu Hospitalizations Ages 65 Plus per 100,000 Population Age 65 Plus, '08 - 10	118.5	150.1	140.1	127.9	N/A
3. Percent of Adults Ages 65 Plus Ever Received a Pneumonia Shot, '08/09	72.2%	N/A	N/A	64.7%	N/A
4. Rate of Mumps Cases per 100,000 Population, '08 - 10	0.0	0.7	4.0	5.5	N/A
5. Rate of Meningococcal Cases per 100,000 Population, '08 - 10	0.0	0.2	0.2	0.2	N/A
6. Rate of H Influenza Cases per 100,000 Population, '08 - 10	1.1	1.3	1.5	1.3	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Rate of Hospital Onset CDIs per 10,000 Patient Days, 2011	N/A	2.4	8.4	8.5	5.94
2. Rate of Community Onset, Healthcare Facility Associated CDIs per 10,000 Patient Days, 2011	N//A	1.7	2.8	2.4	2.05
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Prevention Agenda Indicators					
1. Percent of Adults Binge Drinking within the Last Month, '08/09	21.1%	21.1%	N/A	18.1%	17.6%
2. Percent of Adults with Poor Mental Health (14 or More Days) in the Last Month, '08/09	10.0%	10.2%	N/A	9.8%	10.1%
3. Rate of Age Adjusted Suicides per 100,000 Adjusted Population, '08 - 10	13.0	10.0	8.0	6.8	5.9
Other Indicators					
1 Rate of Suicides for Ages 15 - 19 per 100,000 Population Ages 15 - 19, '08 - 10	23.2	10.1	4.9	4.0	N/A
2. Rate of Self-inflicted Hospitalizations 10,000 Population, '08 - 10	11.8	9.1	6.1	5.2	N/A
3. Rate of Self-inflicted Hospitalizations for Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	30.2	20.3	11.0	9.7	N/A
4. Rate of Cirrhosis Deaths per 100,000 Population, '08 - 10	5.8	9.8	7.7	6.9	N/A
5. Rate of Cirrhosis Hospitalizations per 10,000 Population, '08 - 10	2.1	2.3	2.5	2.9	N/A
6. Rate of Alcohol-Related Accidents per 100,000 Population, '09 - 11	88.5	92.1	67.4	44.4	N/A
7. Percentage of Alcohol-Related Crashes to Total Accidents, 09	5.2%	4.3%	3.2%	2.8%	N/A

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8. Rate of Alcohol-Related Injuries and Deaths per 100,000 Population, '08 - 10	57.7	59.1	50.0	36.2	N/A
9. Rate of Drug-Related Hospitalizations per 10,000 Population, '08 - 10	16.0	18.1	21.2	27.3	N/A
10. Rate of People Served in Mental Health Outpatient Settings Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011	561.0	338.7	278.5	319.4	N/A
11. Rate of People Served in Mental Health Outpatient Settings Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011	1,368.0	928.9	829.9	973.0	N/A
12. Rate of People Served in Mental Health Outpatient Settings Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011	498.0	452.0	596.5	678.9	N/A
13. Rate of People Served in Mental Health Outpatient Settings Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011	73.0	101.6	174.2	300.2	N/A
14. Rate of People Served in ED for Mental Health Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011	85.0	12.8	5.8	7.2	N/A
15. Rate of People Served in ED for Mental Health Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011	225.6	80.5	34.9	37.8	N/A
16. Rate of People Served in ED for Mental Health Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011	12.5	9.6	20.8	23.9	N/A
17. Rate of People Served in ED for Mental Health Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011	10.4	2.4	3.5	6.4	N/A
18. Percentage of Children Ages 9 - 17 with Serious Emotional Disturbances (SED) Served to Total SED Children Ages 9 - 17, 2011	13.0%	10.2%	7.7%	8.4%	N/A
19. Percentage of Adults Ages 18 - 64 with Serious Mental Illness (SMI) Served, 2011	17.3%	12.3%	14.6%	16.3%	N/A
20. Percentage of Adults Ages 65 Plus with Serious Mental Illness (SMI) Served, 2011	3.1%	3.0%	4.7%	7.2%	N/A
	Average Rate, Ratio or Percentage for the Listed Years	Comparison Regions/Data			
		ARHN	Upstate NY	New York State	2017 Prevention Agenda Benchmark
Other Non-Prevention Agenda Indicators					
1. Rate of Hepatitis A Cases per 100,000 Population, '08 - 10	0.0	0.5	0.5	0.8	N/A
2. Rate of Acute Hepatitis B Cases per 100,000 Population, '08 - 10	0.0	0.5	0.6	0.8	N/A
3. Rate of TB Cases per 100,000 Population, '08 - 10	0.0	0.6	2.4	5.4	N/A
4. Rate of e. Coli 157 Cases per 100,000 Population, '08 - 10	0.5	1.3	0.8	0.6	N/A
5. Rate of Salmonella Cases per 100,000 Population, '08 - 10	10.6	12.3	12.9	13.9	N/A
6. Rate of Shingles Cases per 100,000 Population, '08 - 10	0.0	0.8	3.2	4.4	N/A
7. Rate of Lyme Disease Cases per 100,000 Population, '08 - 10	272.3	108.1	66.2	42.4	N/A
8. Rate of Confirmed Rabies Cases per 100,000 Population, ' 08 - 10	16.4	5.5	4.1	2.4	N/A
9. Rate of Confirmed West Nile Virus Cases (Humans, Horses, Other Animals, Mosquito Pools) per 100,000 Population, '08 - 10	0.0	0.1	2.7	2.6	N/A

**Table 7:**  
**Health Indicator Data Analysis**

	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Focus Area: Disparities							
Prevention Agenda Indicators							
1. Percentage of Overall Premature Deaths (Ages 35 - 64) , '08 - 10	Worse	X					
2. Ratio of Black, Non-Hispanic Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	Worse			X			
3. Ratio of Hispanic/Latino Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	Less than 10						
4. Rate of Adult Age-Adjusted Preventable Hospitalizations per 100,000 Population (Ages 18 Plus), '08 - 10	Worse	X					
5. Ratio of Black, Non-Hispanic Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	Meets/Better						
6. Ratio of Hispanic/Latino Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	Meets/Better						
7. Percentage of Adults ( Ages 18 - 64) with Health Insurance, '08/09	Worse	X					
8. Percentage of Adults with Regular Health Care Provider, '08/09	Worse	X					
		4	0	1	0	62.5%	20.0%
Other Disparity Indicators							
1. Rate of Total Deaths per 100,000 Population, '08 - 10	Worse	X					
2. Rate of Total Deaths per 100,000 Adjusted Population, '08 - 10	Worse	X					
3. Rate of Emergency Department Visits per 10,000 Population, '08 - 10	Meets/Better						
4. Rate of Emergency Department Visits per 10,000 Adjusted Population, '08 - 10	Meets/Better						
5. Rate of Total Hospital Discharges per 10,000 Population, '08 - 10	Meets/Better						
6. Rate of Total Hospital Discharges per 10,000 Adjusted Population, '08 - 10	Meets/Better						
7. Percentage of Adults (18 and Older) Who Did Not Receive Care Due to Costs, '08/09	Meets/Better						
8. % of Adults (18 and Older) with Poor Physical Health, '08/09	Worse	X					
9. % of Adults (18 and Older) with Physical Limitations, '08/09	Meets/Better						
10. % of Adults (18 and Older) with Health Problems that Need Special Equipment, '08/09	Meets/Better						
11. Percentage of Adults (18 and Older) with Disabilities, '08/09	Meets/Better						
		3	0	0	0	27.3%	0.0%

		7	0	1	0	42.1%	12.5%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Focus Area: Injuries, Violence, and Occupational Health							
Prevention Agenda Indicators							
1. Rate of Hospitalizations due to Falls for Ages 65 Plus per 10,000 Population, '08 - 10	Worse	X					
2. Rate of ED Visits due to Falls for Children Ages 1 - 4 per 10,000 Population Children Ages 1 - 4, '08 - 10	Worse	X					
3. Rate of Assault-Related Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
4. Ratio of Black, Non-Hispanic Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	Less than 10						
5. Ratio of Hispanic/Latino Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	Less than 10						
6. Ratio of Assault-Related Hospitalizations for Low-Income versus non-Low Income Zip Codes, '08 - 10	Less than 10						
7. Rate of ED Occupational Injuries Among Working Adolescents Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	Worse			X			
		2	0	1	0	42.9%	33.3%
Other Indicators							
1. Rate of Hospitalizations for Falls for Children Ages Under 10 per 10,000 Population Children Ages Under 10 , '08 - 10	Less than 10						
2. Rate of Hospitalizations for Falls for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	Less than 10						
3. Rate of Hospitalizations for Falls for Individuals Ages 15 - 24 per 10,000 Population Individuals Ages 15 - 24, '08 - 10	Worse		X				
4. Rate of Hospitalizations for Falls for Adults Ages 25 - 64 per 10,000 Population Adults Ages 25 - 64, '08 - 10	Meets/Better						
5. Rate of Violent Crimes per 100,000 Population, '07 - 11	Meets/Better						
6. Rate of Property Crimes per 100,000 Population, '07 - 11	Meets/Better						
7. Rate of Total Crimes per 100,000 Population, '07 - 11	Meets/Better						
8. Rate of Malignant Mesothelioma Cases, Ages 15 Plus, per 100,000 Population Ages 15 Plus, '07 - 09	Worse	X					
9. Rate of Pneumonconsis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	Worse	X					
10. Rate of Asbestosis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	Worse	X					
11. Rate of Work-Related Hospitalizations, Employed Ages 16 Plus per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	Worse	X					

12. Rate of Elevated Blood Lead Levels Ages 16 Plus Employed per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	Worse	X					
13. Rate of Total Motor Vehicle Crashes per 100,000 Population, '09 - 11	Meets/Better						
14. Rate of Pedestrian-Related Accidents per 100,000 Population, '09 - 11	Meets/Better						
15. Rate of Speed-Related Accidents per 100,000 Population, '09 - 11	Worse	X					
16. Rate of Motor Vehicle Accident Deaths per 100,000 Population, '08 - 10	Worse			X			
17. Rate of TBI Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
18. Rate of Unintentional Injury Hospitalizations per 10,000 Population, '08 - 10	Worse	X					
19. Rate of Unintentional Injury Hospitalizations Ages 14 and Under per 10,000 Population Ages 14 and Under , '08 - 10	Meets/Better						
20. Rate of Unintentional Injury Hospitalizations Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 - 10	Worse	X					
21. Rate of Poisoning Hospitalizations per 10,000 Population, '08 - 10	Worse		X				
		8	2	1	0	52.4%	9.1%
		10	2	2	0	50.0%	14.3%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Focus Area: Outdoor Air Quality							
1. Number of Days with Unhealthy Ozone, 2007	Meets/Better						
2. Number of Days with Unhealthy Particulated Matter, 2007	Meets/Better						
		0	0	0	0	0.0%	0.0%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Focus Area: Built Environment							
1. Percentage of the Population that Live in Jurisdictions that Adopted Climate Smart Communities Pledge, 2012	Worse				X		
2. Percentage of Commuters Who Use Alternative Modes of Transportation to Work, '07 - 11	Worse			X			
3. Percentage of Population with Low-Income and Low-Access to a Supermarket or Large Grocery Store, 2010	Worse				X		
4. Percentage of Homes in Vulnerable Neighborhoods that have Fewer Asthma Triggers During Home Revisits, '08 - 11	N/A						
		0	0	1	2	75.0%	100.0%
	Comparison to Benchmark	Quartile Ranking				Quartile	Severity
		Q1	Q2	Q3	Q4		

						Score	Score
Focus Area: Water Quality							
1. Percentage of Residents Served by Community Water Systems with Optimally Fluoridated Water, 2012	Worse			X			
		0	0	1	0	100.0%	100.0%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Prevention Agenda Indicators							
1. Percentage of Adults Ages 18 Plus Who are Obese, '08/09	Worse		X				
2. Percentage of Public School Children Who are Obese, '10 - 12	Worse		X				
		0	2	0	0	100.0%	0.0%
Other Indicators							
1. Percentage of Total Students Overweight, '08 - 10	Meets/Better						
2. Percentage of Elementary Students Overweight, Not Obese, '08 - 10	Meets/Better						
3. Percentage of Elementary Students Obese, '08 - 10	Meets/Better						
4. Percentage of Middle and High School Students Overweight, Not Obese, '08 - 10	Meets/Better						
5. Percentage of Middle and High School Students Obese, '08 - 10	Meets/Better						
6. Percentage of WIC Children Ages 2 - 4 Obese, '08 - 10	Meets/Better						
7. Percentage of Age Adjusted Adults (Ages 18 Plus) Overweight or Obese, '08/09	Worse	X					
8. Percentage of Age Adjusted Adults (Ages 18 Plus) Who Did Not Participate in Leisure Activities Last 30 Days, '08/09	Worse	X					
9. Number of Recreational and Fitness Facilities per 100,000 Population, 2009	Meets/Better						
10. Percentage of Age Adjusted Adults (Ages 18 Plus) Eating Five or More Vegetables per Day, '08/09	Worse	X					
11. Percentage of Age Adjusted Adults (Ages 18 Plus) with Cholesterol Check within the Last Five Years, '08/09	Worse	X					
12. Percentage of Age Adjusted Adults (18 Plus) Ever Diagnosed with High Blood Pressure, '08/09	Worse	X					
13. Percentage of Age Adjusted Adults (18 Plus) with Physician Diagnoses Angina, Heart Attack, or Stroke, '08/09	Worse	X					
14. Rate of Cardiovascular Disease Deaths per 100,000 Population, '08 - 10	Meets/Better						
15. Rate of Cardiovascular Premature Deaths ( Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	Worse	X					
16. Rate of Pretransport Deaths per 100,000 Popuation, '08 - 10	Worse	X					
17. Rate of Cardiovascular Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
18. Rate of Diseases of the Heart Deaths per 100,000 Population, '08 - 10	Meets/Better						

19. Rate of Diseases of the Heart Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	Worse	X					
20. Rate of Disease of the Heart Transport Deaths per 100,000 Population, '08 - 10	Meets/Better						
21. Rate of Disease of the Heart Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
22. Rate of Coronary Heart Diseases Deaths per 100,000 Population, '08 - 10	Meets/Better						
23. Rate of Coronary Heart Diseases Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	Meets/Better						
24. Rate of Coronary Heart Disease Transport Deaths per 100,000 Population, '08 - 10	Meets/Better						
25. Rate of Coronary Heart Disease Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
26. Rate of Congestive Heart Failure Deaths per 100,000 Population, '08 - 10	Meets/Better						
27. Rate of Congestive Heart Failure Premature Deaths (Ages 35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	Less than 10						
28. Rate of Congestive Heart Failure Transport Deaths per 100,000 Population, '08 - 10	Worse		X				
29. Rate of Congestive Heart Failure Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
30. Rate of Cerebrovascular (Stroke) Deaths per 100,000 Population, '08 - 10	Worse	X					
31. Rate of Cerebrovascular (Stroke) Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
32. Rate of Hypertension Hospitalizations (Ages 18 Plus) per 100,000 Population Ages 18 Plus, '08 - 10	Meets/Better						
33. Rate of Diabetes Deaths per 100,000 Population, '08 - 10	Worse			X			
34. Rate of Diabetes Hospitalizations (Primary Diagnosis) per 10,000 Population, '08 - 10	Meets/Better						
35. Rate of Diabetes Hospitalizations (Any Diagnosis) per 10,000 Population, '08 - 10	Worse	X					
		11	1	1	0	37.1%	7.7%
		11	3	1	0	40.5%	6.7%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Prevention Agenda Indicators							
1. Percentage of Adults Ages 18 Plus Who Smoke '08/09	Worse			X			
		0	0	1	0	100.0%	100.0%
Other Indicators							
1. Rate of Chronic Lower Respiratory Disease Deaths per 100,000 Population, '08 - 10	Worse		X				
2. Rate of Chronic Lower Respiratory Disease Hospitalizations per 10,000 Population, '08 - 10	Worse		X				
3. Rate of Asthma Deaths per 100,000 Population, '08 - 10	Less than 10						
4. Rate of Asthma Hospitalizations per 10,000 Population, '08 - 10	Worse	X					
5. Rate of Asthma Hospitalizations, Ages 25 - 44,	Worse	X					



per 10,000 Population Ages 25 - 44, '08 - 10							
6. Rate of Asthma Hospitalizations, Ages 45 - 64, per 10,000 Population Ages 45 - 64, '08 - 10	Worse			X			
7. Rate of Asthma Hospitalizations, Ages 65 Plus, per 10,000 Population Ages 65 Plus, '08 - 10	Worse	X					
8. Percentage of Adults with Asthma, '08/09	Meets/Better						
9. Rate of Lung and Bronchus Deaths per 100,000 Population, '07 - 09	Worse	X					
10. Rate of Lung and Bronchus Cases per 100,000 Population, '07 - 09	Worse		X				
11. Number of Registered Tobacco Vendors per 100,000 Population, '09 - 10	Meets/Better						
12. Percentage of Vendors with Sales to Minors Violations, '09 - 10	Worse	X					
13. Percentage of Vendors with Complaints, '09 - 10	Meets/Better						
		5	3	1	0	69.2%	11.1%
		5	3	2	0	71.4%	20.0%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		

<b>Prevention Agenda Indicators</b>							
1. Percentage of Adults Ages 50 - 75 Who Received Colorectal Screenings Based on Recent Guidelines, '08/09	Worse	X					
2. Rate of Asthma ED Visits per 10,000 Population, '08 - 10	Meets/Better						
3. Rate of Asthma ED Visits Ages 0 - 4, per 10,000 Population Ages, 0 - 4, '08 - 10	Meets/Better						
4. Rate of Short-term Diabetes Hospitalizations for Ages 6 - 17 per 10,000 Population, Ages 6 - 17, '08 - 10	Worse				X		
5. Rate of Short-term Diabetes Hospitalizations for Ages 18 Plus per 10,000 Population, Ages 18 Plus, '08 - 10	Meets/Better						
6. Rate of Age Adjusted Heart Attack Hospitalizations per 10,000 Population, 2010	Worse	X					
		2	0	0	1	50.0%	33.3%

<b>Other Indicators</b>							
1. Rate of Asthma ED Visits for Ages 18 - 64 per 10,000 Population Ages 18 - 64, '08 - 10	Meets/Better						
2. Rate of Asthma ED Visits for Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 10	Meets/Better						
3. Rate of All Cancer Cases per 100,000 Population, '07 - 09	Worse	X					
4. Rate of all Cancer Deaths per 100,000 Population, '07 - 09	Worse	X					
5. Rate of Female Breast Cancer Cases per 100,000 Female Population, '07 -09	Worse	X					
6. Rate of Female Late Stage Breast Cancer Cases per 100,000 Female Population, '07 - 09	Less than 10						
7. Rate of Female Breast Cancer Deaths per 100,000 Female Population, '07	Worse	X					
8. Percentage of Women Ages 40 Plus With	Worse	X					

Mammogram within Last Two Years, '08/ 09							
9. Rate of Cervix and Uteric Cancer Cases per 100,000 Female Population, '07 - 09	Less than 10						
10. Rate of Cervix and Uteric Cancer Deaths per 100,000 Female Population, '07 - 09	Less than 10						
11. Percentage of Women Ages 18 Plus with a Pap Smear within the Last Three Years, '08/ 09	Worse	X					
12. Rate of Ovarian Cancer Cases per 100,000 Female Population, '07 - 09	Less than 10						
13. Rate of Ovarian Cancer Deaths per 100,000 Female Population, '07 - 09	Less than 10						
14. Rate of Colon and Rectum Cancer Cases per 100,000 Population, '07 - 09	Meets/Better						
15. Rate of Colon and Rectum Cancer Deaths per 100,000 Population, '07 - 09	Worse	X					
16. Percentage of Adults Ages 50 Plus with Home Blood Stool Test within the Last Two Years, '08/09	Worse	X					
17. Percentage of Adults Ages 50 Plus with Sigmoidoscopy or Colonoscopy within Last Ten Years, '08/09	Worse	X					
18. Rate of Prostate Cancer Deaths per 100,000 Male Population, '07 - 09	Worse		X				
19. Rate of Prostate Cancer Cases per 100,000 Male Population, '07 - 09	Worse	X					
20. Rate of Prostate Cancer Late Stage Cancer Cases per 100,000 Male Population, '07 - 09	Less than 10						
21. Percentage of Males, Ages 40 Plus with a Digital Rectal Exam within Last Two Years, '08/09	Worse	X					
22. Percentage of males ages 40 Plus with a Prostate Antigen Test within Last Two Years, '08/09	Worse		X				
23. Rate of Melanoma Cancer Deaths per 100,000 Population, '07 - '09	Less than 10						
24. Percentage of Medicaid Enrollees with at Least One Preventive Dental Visit within the Year, '08 - 10	Worse	X					
25. Percentage of Age Adjusted Adults with a Dental Visit Within the Last 12 Months, '08/09	Meets/Better						
26. Oral Cavity and Pharnyx Cancer Deaths per 100,000 Population, '07-09	Less than 10						
27. Oral Cavity and Pharnyx Cancer Deaths, Adults Ages 45 - 74, per 100,000 Population, Ages 45 - 74, '07 - 09	Less than 10						
28. Oral Cavity and Pharnyx Cancer Cases per 100,000 Population, '07 - 09	Meets/Better						
		12	2	0	0	50.0%	0.0%
		14	2	0	1	50.0%	5.9%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Focus Area: Maternal and Infant Health							
Prevention Agenda Indicators							
1. Percentage Preterm Births < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	Meets/Better						
2. Ratio of Preterm Births (< 37 wks) Black/NH to White/NH, '08 - 10	Less than 10						
3. Ratio of Preterm Births (< 37 wks) Hisp/Latino to White/NH, '08 - 10	Less than 10						

4. Ratio of Preterm Births (< 37 wks) Medicaid to Non-Medicaid, '08 - 10	Worse	X					
5. Rate of Maternal Mortality per 100,000 Births, '08 - 10	Less than 10						
6. Percentage of Live Birth Infants Exclusively Breastfed in Delivery Hospital, '08 - 10	Meets/Better						
7. Ratio of Infants Exclusively Breastfed in Delivery Hospital Black, non-Hispanic to White, non-Hispanic, '08 - 10	Less than 10						
8. Ratio of Infants Exclusively Breastfed in Delivery Hospital Hispanic/Latino to White, non-Hispanic, '08 - 10	Worse			X			
9. Ratio of Infants Exclusively Breastfed in Delivery Hospital Medicaid to Non-Medicaid Births, '08 - 10	Worse		X				
		1	1	1	0	33.3%	33.3%
<b>Other Indicators</b>							
1. Percentage Preterm Births < 32 weeks of Total Births Where Gestation Period is Known, '08 - 10	Worse	X					
2. Percentage Preterm Births 32 to < 37 Weeks of Total Births Where Gestation Period is Known, '08 - 10	Meets/Better						
3. Percentage of Total Births with Weights Less Than 1,500 grams, '08 - 10	Worse	X					
4. Percentage of Singleton Births with Weights Less Than 1,500 grams, '08 - 10	Worse	X					
5. Percentage of Total Births with Weights Less Than 2,500 grams, '08 - 10	Worse	X					
6. Percentage of Singleton Births with Weights Less Than 2,500 grams, '08 - 10	Meets/Better						
7. Percentage of Total Births for Black, Non-Hispanic, with Weights Less than 2,500 Grams, '08 - 10	Less than 10						
8. Percentage of Total Births for Hispanic/Latino, with Weights Less than 2,500 Grams, '08 - 10	Less than 10						
9. Infant Mortality Rate per 1,000 Live Births, '08 - 10	Worse	X					
10. Infant Mortality Rate for Black, Non-Hispanic per 1,000 Births, '08 - 10	Less than 10						
11. Infant Mortality Rate for Hispanic/Latino per 1,000 Births, '08 - 10	Less than 10						
12. Rate of Deaths (28 Weeks Gestation to Seven Days) per 1,000 Live Births and Perinatal Deaths, '08 - 10	Worse	X					
13. Percentage Early Prenatal Care of Total Births Where Prenatal Care Status is Known, '08 - 10	Worse	X					
14. Percentage Early Prenatal Care for Black, Non-Hispanic, '08 - 10	Less than 10						
15. Percentage Early Prenatal Care for Hispanic/Latino, '08 - 10	Less than 10						
16. Percentage APGAR Scores of Less Than Five at Five Minute Mark of Births Where APGAR Score is Known, '08 - 10	Worse				X		
17. Rate of Newborn Drug Related Hospitalizations per 10,000 Births, '08 - 10	Meets/Better						
18. Percentage WIC Women Breastfed at Six months, '08 - 10	Worse			X			
19. Percentage Infants Receiving Any Breast Milk in Delivery Hospital, '08 - 10	Worse	X					
		8	0	1	1	52.6%	20.0%

		9	1	2	1	46.4%	23.1%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Prevention Agenda Indicators							
1. Percent of Births within 24 months of Previous Pregnancy, '08 - 10	Worse		X				
2. Rate of Pregnancies Ages 15 - 17 year per 1,000 Females Ages 15-17, '08 - 10	Meets/Better						
3. Ratio of Pregnancy Rates for Ages 15 - 17 Black, non-Hispanic to White, non-Hispanic, '08 - 10	Meets/Better						
4. Ratio of Pregnancy Rates for Ages 15 - 17 Hispanic/Latino to White, non-Hispanic, '08 - 10	Meets/Better						
5. Percent of Unintended Births to Total Births, 2011	Worse		X				
6. Ratio of Unintended Births Black, non-Hispanic to White, non-Hispanic, '08 - 10	Less than 10						
7. Ratio of Unintended Births Hispanic/Latino to White, non-Hispanic, '08 - 10	Less than 10						
8. Ratio of Unintended Births Medicaid to Non-Medicaid, '08 - 10	Worse	X					
9. Percentage of Women Ages 18- 64 with Health Insurance, '08/09	Worse	X					
		2	2	0	0	44.4%	0.0%
Other Indicators							
1. Rate of Total Births per 1,000 Females Ages 15-44, '08 - 10	Meets/Better						
2. Percent Multiple Births of Total Births, '08 - 10	Meets/Better						
3. Percent C-Sections to Total Births, '08 - 10	Meets/Better						
4. Rate of Total Pregnancies per 1,000 Females Ages 15-44, '08 - 10	Meets/Better						
5. Rate of Births Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	Less than 10						
6. Rate of Pregnancies Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	Less than 10						
7. Rate of Births Ages 15 - 17 per 1,000 Females Ages 15-17, '08 - 10	Worse		X				
8. Rate of Births Ages 15 - 19 per 1,000 Females Ages 15-19, '08 - 10	Worse			X			
9. Rate of Pregnancies Ages 15 - 19 per 1,000 Females Ages 5-19, '08 - 10	Worse		X				
10. Rate of Births Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	Worse				X		
11. Rate of Pregnancies Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	Worse			X			
12. Percent Total Births to Women Ages 35 Plus, '08 - 10	Meets/Better						
13. Rate of Abortions Ages 15 - 19 per 100 Live Births, Mothers Ages 15-19, '08 - 10	Meets/Better						
14. Rate of Abortions All Ages per 100 Live Births to All Mothers, '08 - 10	Meets/Better						
15. Percentage of WIC Women Pre-pregnancy Underweight, '08 - 10	Worse		X				
16. Percentage of WIC Women Pre-pregnancy Overweight but not Obese, '08 - 10	Meets/Better						

17. Percentage of WIC Women Pre-pregnancy Obese, '08 - 10	Worse		X				
18. Percentage of WIC Women with Gestational Weight Gain Greater than Ideal, '08 - 10	Worse	X					
19. Percentage of WIC Women with Gestational Diabetes, '08 - 10	Worse	X					
20. Percentage of WIC Women with Gestational Hypertension, '08 - 10	Worse				X		
		2	4	2	2	50.0%	40.0%
		4	6	2	2	48.3%	28.6%

	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		

#### Prevention Agenda Indicators

1. Percentage of Children Ages 0 - 15 Months with Government Insurance with Recommended Well Visits, 2011	Meets/Better						
2. Percentage of Children Ages 3 - 6 Years with Government Insurance with Recommended Well Visits, 2011	Meets/Better						
3. Percentage of Children Ages 12 -21 Years with Government Insurance with Recommended Well Visits, 2011	Worse	X					
4. Percentage of Children Ages 0 -19 with Health Insurance, 2010	Worse	X					
5. Percentage of 3rd Graders with Untreated Tooth Decay, '09 - 11	Worse				X		
6. Ratio of 3rd Graders with Untreated Tooth Decay, Low Income Children to Non-Low income Children, '09 - 11	Meets/Better						
		2	0	0	1	50.0%	33.3%

#### Other Indicators

1. Rate of Children Deaths Ages 1 - 4 per 100,000 Population Children Ages 1 - 4, '08 - 10	Less than 10						
2. Rate of Children Deaths Ages 5 - 9 per 100,000 Population Children Ages 1 - 4, '08 - 10	Less than 10						
3. Rate of Children Deaths Ages 10 - 14 per 100,000 Population Children ages 10 - 14, '08 - 10	Less than 10						
4. Rate of Children Deaths Ages 5 - 14 per 100,000 Population Children Ages 5 - 14, '08 - 10	Less than 10						
5. Rate of Children Deaths Ages 5 - 19 per 100,000 Population Children Ages 15 - 19, '08 - 10	Less than 10						
6. Rate of Children Deaths Ages 1 - 19 per 100,000 Population Children Ages 1 - 19, '08 - 10	Worse			X			
7. Rate of Asthma Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	Meets/Better						
8. Rate of Asthma Hospitalizations Children Ages 5 - 14 per 10,000 Population Children Ages 5 - 14, '08 - 10	Meets/Better						
9. Rate of Asthma Hospitalizations Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17, 08 - 10	Meets/Better						
10. Rate of Gastroenteritis Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	Meets/Better						

11. Rate of Otitis Media Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	Less than 10						
12. Rate of Pneumonia Hospitalizations Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	Meets/Better						
13. Rate of ED Asthma Visits Children Ages 0 - 4 per 10,000 Population Children Ages 0 - 4, '08 - 10	Meets/Better						
14. Percentage of Children Screened for Lead by Age 9 months	Worse		X				
15. Percentage of Children Screened for Lead by Age 18 months	Worse	X					
16. Percentage of Children Screened for Lead by Age 36 months (at least two screenings)	Worse		X				
17. Rate of Children Ages < 6 with Confirmed Blood Lead Levels >= 10 mg/dl Cases Per 1,000 Children Tested, '08 - 10	Worse	X					
18. Rate of Unintentional Injury Hospitalizations for Children Under Age 10 per 10,000 Population Children Under Age 10, '08 - 10	Worse	X					
19. Rate of Unintentional Injury Hospitalizations for Children Ages 10 - 14 per 10,000 Population Children Ages 10 - 14, '08 - 10	Meets/Better						
20. Rate of Unintentional Injury Hospitalizations for Children/Young Adults Ages 15 - 24 per 10,000 Population Ages 15 - 24, '08 - 10	Worse	X					
21. Rate of Asthma ED Visits for Children Ages 0 - 17 per 10,000 Population Children Ages 0 - 17, '07 - 09	Meets/Better						
22. Percentage of Medicaid Enrollees Ages 2 - 20 with at Least One Dental Visit, '08 - 10	Meets/Better						
23. Percentage of 3rd Graders with Dental Caries, '09 - 11	N/A						
24. Percentage of 3rd Graders with Dental Sealants, '09 - 11	N/A						
25. Percentage of 3rd Graders with Dental Insurance, '09 - 11	N/A						
26. Percentage of 3rd Graders with at Least One Dental Visit, '09 - 11	N/A						
27. Percentage of 3rd Graders Taking Fluoride Tablets Regularly, '09 - 11	N/A						
28. Rate of Caries ED Visits for Children Ages 3 - 5 per 10,000 Population Children Ages 3 - 5, '08 - 10	Meets/Better						
29. Percentage of WIC Children Ages 2 - 4 Viewing Two Hours TV or Less Per Day, '08 - 10	Worse	X					
		5	2	1	0	27.6%	12.5%
		7	2	1	1	31.4%	18.2%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		

Prevention Agenda Indicators							
1. Rate of Newly Diagnosed HIV Cases per 100,000 Population, '08 - 10	Less than 10						
2. Ratio of Newly Diagnosed HIV Cases Black, non-Hispanic versus White, non-Hispanic, '08 - 10	N/A						

		0	0	0	0	0.0%	0.0%
Other Indicators							
1. Rate of AIDS Cases per 100,000 Population, '08 - 10	Less than 10						
2. Rate of AIDS Deaths per 100,000 Adjusted Population, '08 - 10	Less than 10						
		0	0	0	0	0.0%	0.0%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Prevention Agenda Indicators							
1. Rate of Primary and Secondary Syphilis for Males per 100,000 Male Population, 2010	Less than 10						
2. Rate of Primary and Secondary Syphilis for Females per 100,000 Female Population, 2010	Less than 10						
3. Rate of Gonorrhea Cases for Females Ages 15-44 per 100,000 Female Population Ages 15-44, 2010	Meets/Better						
4. Rate of Gonorrhea Cases for Males Ages 15 - 44 per 100,000 Male Population Ages 15-44, 2010	Meets/Better						
5. Rate of Chlamydia for Females Ages 15 - 44 per 100,000 Females Ages 15 - 44, '08 - 10	Meets/Better						
		0	0	0	0	0.0%	0.0%
Other Indicators							
1. Rate of Early Syphilis Cases per 100,000 Population, '08 - 10	Less than 10						
2. Rate of Gonorrhea Cases per 100,000 Population, '08 - 10	Meets/Better						
3. Rate of Gonorrhea Ages 15 - 19 Cases per 100,000 Population Ages 15-19, '08 - 10	Less than 10						
4. Rate of Chlamydia Cases All Males per 100,000 Male Population, '08 - 10	Meets/Better						
5. Rate of Chlamydia Cases Males Ages 15 - 19 Cases per 100,000 Male Population Ages 15-19, '08 - 10	Meets/Better						
6. Rate of Chlamydia Cases Males Ages 20 - 24 per 100,000 Male Population Ages 20-24, '08 - 10	Meets/Better						
7. Rate of Chlamydia Cases All Females per 100,000 Female Population, '08 - 10	Meets/Better						
8. Rate of Chlamydia Cases Females Ages 15- 19 per 100,000 Female Population Ages 15 - 19, '08 - 10	Meets/Better						
9. Rate of Chlamydia Cases Females Ages 20 - 24 per 100,000 Female Population Ages 20-24, '08 - 10	Meets/Better						
10. Rate of PID Hospitalizations Females Ages 15 - 44 per 10,000 Female Population Ages 15 - 44, '08 - 10	Less than 10						
		0	0	0	0	0.0%	0.0%
		0	0	0	0	0.0%	0.0%
	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Prevention Agenda Indicators							

1. Percent of Children Ages 19 - 35 months with 4:3:1:3:3:1:4, 2011	Worse		X				
2. Percent females 13 - 17 with 3 dose HPV vaccine, 2011	Worse		X				
3. Percent of Adults Ages 65 Plus With Flu Shots Within Last Year, '08/09	Worse	X					
		1	2	0	0	100.0%	0.0%

Other Indicators							
1. Rate of Pertussis Cases per 100,000 Population, '08 - 10	Less than 10						
2. Rate of Pneumonia/flu Hospitalizations Ages 65 Plus per 100,000 Population Age 65 Plus, '08 - 10	Meets/Better						
3. Percent of Adults Ages 65 Plus Ever Received a Pneumonia Shot, '08/09	Meets/Better						
4. Rate of Mumps Cases per 100,000 Population, '08 - 10	Less than 10						
5. Rate of Meningococcal Cases per 100,000 Population, '08 - 10	Less than 10						
6. Rate of H Influenza Cases per 100,000 Population, '08 - 10	Less than 10						
		0	0	0	0	0.0%	0.0%
		1	2	0	0	33.3%	0.0%

	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		

Prevention Agenda Indicators							
1. Rate of Hospital Onset CDIs per 10,000 Patient Days, 2011	N/A						
2. Rate of Community Onset, Healthcare Facility Associated CDIs per 10,000 Patient Days, 2011	N/A						
		0	0	0	0	0.0%	0.0%

	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		

Prevention Agenda Indicators							
1. Percent of Adults Binge Drinking within the Last Month, '08/09	Worse	X					
2. Percent of Adults with Poor Mental Health (14 or More Days) in the Last Month, '08/09	Meets/Better						
3. Rate of Age Adjusted Suicides per 100,000 Adjusted Population, '08 - 10	Worse				X		
		1	0	0	1	66.7%	50.0%

Other Indicators							
1 Rate of Suicides for Ages 15 - 19 per 100,000 Population Ages 15 - 19, '08 - 10	Less than 10						
2. Rate of Self-inflicted Hospitalizations 10,000 Population, '08 - 10	Worse				X		
3. Rate of Self-inflicted Hospitalizations for Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	Worse				X		
4. Rate of Cirrhosis Deaths per 100,000 Population,	Meets/Better						



'08 - 10							
5. Rate of Cirrhosis Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
6. Rate of Alcohol-Related Accidents per 100,000 Population, '09 - 11	Worse		X				
7. Percentage of Alcohol-Related Crashes to Total Accidents, 09 - 11	Worse			X			
8. Rate of Alcohol-Related Injuries and Deaths per 100,000 Population, '08 - 10	Worse	X					
9. Rate of Drug-Related Hospitalizations per 10,000 Population, '08 - 10	Meets/Better						
10. Rate of People Served in Mental Health Outpatient Settings Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011	Worse				X		
11. Rate of People Served in Mental Health Outpatient Settings Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011	Worse			X			
12. Rate of People Served in Mental Health Outpatient Settings Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011	Meets/Better						
13. Rate of People Served in Mental Health Outpatient Settings Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011	Meets/Better						
14. Rate of People Served in ED for Mental Health Ages 8 and Below per 100,000 Population Ages 8 and Below, 2011	Worse				X		
15. Rate of People Served in ED for Mental Health Ages 9 - 17 per 100,000 Population Ages 9 - 17, 2011	Worse				X		
16. Rate of People Served in ED for Mental Health Ages 18 - 64 per 100,000 Population Ages 18 - 64, 2011	Meets/Better						
17. Rate of People Served in ED for Mental Health Ages 65 Plus per 100,000 Population Ages 65 Plus, 2011	Worse				X		
18. Percentage of Children Ages 9 - 17 with Serious Emotional Disturbances (SED) Served to Total SED Children Ages 9 - 17, 2011	Meets/Better						
19. Percentage of Adults Ages 18 - 64 with Serious Mental Illness (SMI) Served, 2011	Meets/Better						
20. Percentage of Adults Ages 65 Plus with Serious Mental Illness (SMI) Served, 2011	Worse		X				
		1	2	2	6	55.0%	72.7%
		2	2	2	7	56.5%	69.2%
Washington County: Revised 4/3/2013 Page 17 of 17	Comparison to Benchmark	Quartile Ranking				Quartile Score	Severity Score
		Q1	Q2	Q3	Q4		
Other Non-Prevention Agenda Indicators							
1. Rate of Hepatitis A Cases per 100,000 Population, '08 - 10	Less than 10						
2. Rate of Acute Hepatitis B Cases per 100,000 Population, '08 - 10	Less than 10						
3. Rate of TB Cases per 100,000 Population, '08 - 10	Less than 10						
4. Rate of e. Coli 157 Cases per 100,000 Population, '08 - 10	Less than 10						
5. Rate of Salmonella Cases per 100,000 Population,	Meets/Better						

'08 - 10							
6. Rate of Shigella Cases per 100,000 Population, '08 - 10	Less than 10						
7. Rate of Lyme Disease Cases per 100,000 Population, '08 - 10	Worse				X		
8. Rate of Confirmed Rabies Cases per 100,000 Population, '08 - 10	Worse				X		
9. Rate of Confirmed West Nile Virus Cases (Humans, Horses, Other Animals, Mosquito Pools) per 100,000 Population, '08 - 10	Less than 10						
		0	0	0	2	22.2%	100.0%

## **Appendix 1:**

### **Methodology and Data Sources**

The Center for Health Workforce Studies at the University at Albany School of Public Health (the Center) under contract with the Adirondack Rural Health Network, a program of the Adirondack Health Institute, identified and collected data from a variety of sources on the nine counties in the Adirondack region. Those counties include: Clinton, Essex, Franklin, Fulton, Hamilton, Montgomery, Saratoga, Warren, and Washington.

The initial step in the process was identifying which data elements to collect. Center staff received an initial list of potential data elements from the ARHN Data Subcommittee and then supplemented that information with data from other sources. Since most of the health behavior, status, and outcome data were only available at the county level, the Center in conjunction with the ARHN Data Subcommittee concluded that all data used for the project would be displayed by county and aggregated to the ARHN region.<sup>17</sup> Additionally, other data were collected to further enhance already identified data. For example, one Prevention Agenda indicator was assault-related hospitalizations. That indicator was augmented by other crime statistics from the New York State Division of Criminal Justice.

The overall goal of collecting and providing these data to ARHN members was to provide a comprehensive picture of the individual counties within the Adirondack region, including providing an overview of population health as well as an environmental scan. In total, counties and hospitals were provided with nearly 450 distinct data elements across the following four reports:

- Demographic Data
- Educational Profile
- Health Behaviors, Health Outcomes, and Health Status
- Health Delivery System Profile

Data was provided to all counties and hospitals as PDFs as well as in Excel files. All sources for the data were listed and made available to the counties and hospitals. The sources for the data elements in the Health Behaviors, Health Outcomes, and Health Status report were listed in a separate file and included their respective internet URL links. The data in each of the four reports were aggregated, when feasible, into the ARHN region, Upstate New York (all counties but the five in New York City), and statewide.

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<sup>17</sup> Aggregated data for the ARHN region included Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, and Washington counties but did not include Montgomery County.

### Demographic Data

Demographic data was primarily taken from the 2007 - 2011 American Community Survey, supplemented with data from the Bureau of Labor Statistics, Local Area Unemployment Statistics for 2011; the New York State Department of Health (NYSDOH) Medicaid Data for 2011; and employment sector data from the 2009 – 2011 American Community Survey. Among the information incorporated into the demographic report included:

- Race/Ethnicity
- Age by groups (0 – 4, 5 – 17, 18 – 64, and 65 plus)
- Income and poverty, including the percent who received Medicaid
- Housing stock
- Availability of vehicles
- Education status for those 25 and older
- Employment status
- Employment sector

### Educational Profile

The education profile was taken mainly from the New York State Education Department (NYSED), School Report Card for 2010 – 2011, supplemented with data from the National Center for Education Statistics, Integrated Post-Secondary Data System on Post-Secondary graduations for 2010 – 2011 and registered nurse graduations from the Center. Among the data displayed in the educational profile included:

- Number of school districts
- Total school district enrollment
- Number of students on free and reduced lunch
- Dropout rate
- Total number of teachers
- Number of and graduations from licensed practical nurse programs
- Number of and graduations from registered nurse programs.

### Health Behaviors, Health Outcomes, and Health Status

The vast majority of health behaviors, outcomes, and status data come from NYSDOH. Data sources included the:

- Community Health Indicators Report (<http://www.health.ny.gov/statistics/chac/indicators/>);
- County Health Indicators by Race/Ethnicity  
(<http://www.health.ny.gov/statistics/community/minority/county/>);

- County Dashboards of Indicators for Tracking Public Health Priority Areas, 2013 - 2013 ([http://www.health.ny.gov/prevention/prevention\\_agenda/2013-2017/indicators/2013/indicator\\_map.htm](http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/indicator_map.htm)); and
- 2008 – 2009 Behavioral Risk Factor Surveillance System (BRFSS) (<http://www.health.ny.gov/statistics/brfss/>).

Information on NYSDOH’s methodologies used to collect and display data from the above sources can be found on their respective data pages.

NYSDOH data used in this report are updated annually, with the exception of BRFSS data, and most of the data were for the years 2008 – 2010. Cancer data were for the years 2007 – 2009, and BRFSS data were from the 2008 and 2009 survey. Data displayed in this report included an average annual rate or percentage and, when available, counts for the individual three years. The years the data covered were listed both in the report as well as in the sources document.

NYSDOH data also was supplemented from other sources such as the County Health rankings, the New York State Division of Criminal Justice Services, the New York State Institute for Traffic Safety Management and Research, and the New York State Office of Mental Health Patient Characteristics Survey, among others. To the extent possible, Center staff used similar years for the additional data that were collected. Nearly 300 data elements are displayed in this report broken out by the Prevention Agenda focus areas.

Data were downloaded from their various sources and stored in separate Excel files, based on their respective focus area. The Health Behaviors, Health Outcomes, and Health Status report was created in Excel and linked to the raw data, and population rates were recalculated based on the number of cases as well as the population listed in the data source.

Data in the report were organized by the six priority areas as outlined by NYSDOH at [http://www.health.ny.gov/prevention/prevention\\_agenda/2013-2017/](http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/). The data were also separated into two subsections, those that were identified as Prevention Agenda indicators and those that were “other indicators.” The data elements were organized by 17 focus areas as outlined in the table below.

Focus Area	Number of Indicators	
	Prevention Agenda	Other
Health Disparities	8	11
Injuries, Violence, and Occupational Health	7	21
Outdoor Air Quality	2	0
Built Environment	4	0
Water Quality	1	0
Obesity in Children and Adults	2	35
Reduce Illness, Disability, and Death Related to Tobacco Use and Secondhand Smoke Exposure	1	13
Increase Access to High Quality Chronic Disease Preventive Care and Management	6	28
Maternal and Infant Health	9	19
Preconception and Reproductive Health	9	20
Child Health	6	29
HIV	2	2
STDs	5	10
Vaccine Preventable Diseases	3	6
Healthcare Associated Infections	2	0
Substance Abuse and other Mental, Emotional, and Behavioral Disorders	3	20
Other Illnesses	0	9

Those data elements that were Prevention Agenda indicators were compared against their respective Prevention Agenda benchmarks. “Other indicators” were compared against either Upstate New York benchmarks, when available or then New York State benchmarks when Upstate New York benchmarks were not available. The report also included a status field that indicated whether indicators were met, were better, or were worse than their corresponding benchmarks. When indicators were worse than their corresponding benchmarks, their distances from their respective benchmarks were calculated. On the report, distances from benchmarks were indicated using quartiles rankings, i.e., if distances from their corresponding benchmarks were less than 25%, indicators were in quartile 1, if distances were between 25% and 49.9% from their respective benchmarks, indicators were in quartile 2, etc.

The Health Behaviors, Health Outcomes, and Health Status Report also indicated the percentage of total indicators that were worse than their respective benchmarks by focus area. For example, if 21 of the 35 child health focus area indicators were worse than their respective benchmarks, the quartile summary score would be 60% (21/35). Additionally, the report identified a severity score, i.e., the percentage of those indicators that were either in quartile 3 or 4 compared to all indicators which were worse than their corresponding benchmarks. Using the above example, if 9 of the 21 child health focus indicators that were worse than their respective benchmarks were in quartiles 3 or 4, the severity score would be 43% (9/21). Quartile summary scores and severity scores were calculated for each focus area as well as for

Prevention Agenda indicators and for “other indicators” within each focus area. Both quartile summary scores and severity scores were used to understand if the specific focus areas were challenges to the counties and hospitals. In certain cases, focus areas would have low severity scores but high quartile summary scores indicating that while not especially severe, the focus area offered significant challenges to the community.

### Health Delivery System Profile

The data on the health system came from NYSDOH list of facilities, NYSED licensure file for 2011, the UDS Mapper for 2011 Community Health Center Patients, the Health Resources and Services Administration Data Warehouse for health professional shortage (HPSAs) areas for 2012, and Center data on 2011 physicians. Among the data incorporated into this report included:

- Hospital, nursing home, and adult care facility beds
- Number of community health center patients
- Number of and population within primary care, mental health, or dental care HPSAs
- Total physicians and physicians by certain specialties and sub-specialties
- Count of individuals licensed

### Community Provider Survey

A survey of providers was conducted by the Center for Human Services Research (CHSR) at the University at Albany School of Social Welfare between December 5, 2012 and January 21, 2013. The purpose of the study was to provide feedback from community service providers in order to: 1) guide strategic planning, 2) highlight topics for increased public awareness, 3) identify areas for training, and 4) inform the statewide prevention agenda, including rating the relative importance of five of the New York State Prevention Agenda Priority areas<sup>18</sup>. Results were presented for each of the eight ARHN counties<sup>19</sup> and aggregated for the region.

The 81 question survey was developed through a collaborative effort by a seven-member ARHN Subcommittee during the fall of 2012. The seven volunteer members are representatives of county public health departments and hospitals in the region that are involved in the ARHN. Subcommittee members were responsible for identifying the broad research questions to be addressed by the survey, as well as for drafting the individual survey questions.

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<sup>18</sup> At the time of the survey, the New York State had identified five priority areas (1) Promote a Health and Safe Environment; (2) Preventing Chronic Disease; (3) Promoting Healthy Women, Infants, and Children; (4) Prevent HIV/STDs, Vaccine-Preventable Disease, and Health Care-Associated Infections; and (5) Promote Mental Health and Prevent Substance Abuse. The sixth priority area, Improve Health Status and Reduce Health Disparities, had not yet been identified and was not included as part of the provider survey.

<sup>19</sup> Montgomery County was not included in the survey.

Subcommittee members were also charged with identifying potential respondents to participate in the survey. Because each county in the region is unique in its health care and service-provision structure, ARHN members from each of the counties were asked to generate a list of relevant stakeholders from their own communities who would represent the full range of programs and service providers. As such, the survey population does not necessarily represent a random sampling of health care and service providers, but an attempt at a complete list of the agencies deemed by the ARHN to be the most important and representative within the region.

The survey was administered electronically using the web-based Survey Monkey program and distributed to an email contact list of 624 individuals identified in the stakeholder list created by the Subcommittee. Two weeks before the survey was launched on December 5, 2012, an announcement was sent to all participants to encourage participation. After the initial survey email, two reminder notices were also sent to those who had not yet completed the survey. Additionally, participation was also incentivized through an opt-in gift card drawing, with 20 entrants randomly selected to receive a \$25 Stewart's gift card at the conclusion of the survey. Ultimately, 285 surveys were completed during the six-week survey period, a response rate of 45.7%. Response rates varied by individual counties, respondents may have been counted in more than one county depending on the extent of their service area.



**Appendix 2:**  
**ARHN Survey Regional Results Summary**

Results of the Adirondack Regional Health Network Survey  
Regional Results Summary

March 28, 2013

Report to the Adirondack Rural Health Network

Brad R. Watts  
Center for Human Services Research  
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## Executive Summary

In December 2012 and January 2013, the Adirondack Regional Health Network (ARHN) conducted a survey of selected stakeholders representing health care and service-providing agencies within the eight-county region. The results of the survey are intended to provide an overview of regional needs and priorities, to inform future planning and the development of a regional health care agenda.

- The 81-question survey was distributed electronically to 624 participants. In total, 285 surveys were completed, a response rate of 45.7 percent.
- Among the five NYS Prevention Agenda priority areas, chronic disease was ranked as the area of highest community need and agency interest.
- The agenda area of HIV, STIs, and vaccine preventable diseases was ranked lowest in terms of overall interest and concern.
- The top emerging issues in the region include increases in obesity and related health issues, increases in substance abuse, and mental illness.
- The population groups identified most in need of targeted interventions are: the poor, children, individuals with mental health issues, the elderly, and substance abusers.
- Only about half of survey respondents reported being familiar with the NYS Department of Health Prevention Agenda priority areas.
- The individual issues of greatest importance to survey respondents were the general health and safety of the physical environment, diabetes prevention, substance abuse, mental health screening and treatment, and the prevention of heart disease.
- When asked to rate the effectiveness of current local efforts to address major health issues, a large portion of respondents indicated that they did not know, which suggests that additional information and publicity may be needed for health activities in the region.
- Education is the dominant strategy currently used to address major health issues in the region. Direct, hands-on strategies such as screening or clinical services are less prevalent.
- Technology is not highly utilized by health service providers and their clients in the region. A slight majority of respondents agreed that technology enhancement should be a top priority for the region.
- The top future concern for stakeholders was funding. Regional health care organizations expressed concerns about reimbursement rates and expectations of reduced funding through government payments and other grants.

## Overview

This report details the findings of a survey conducted by the Center for Human Services Research (CHSR) and the Adirondack Rural Health Network (ARHN) between December 5, 2012 and January 21, 2013. The purpose of the study was to obtain feedback from community service providers in order to: 1) guide strategic planning, 2) highlight topics for increased public awareness, 3) identify areas for training, and 4) inform the statewide prevention agenda. Results presented in this report are for the entire region served by the Adirondack Rural Health Network, which includes eight counties located in upstate New York. In this report, these counties will be referred to as “the region”:

- Clinton
- Essex
- Franklin
- Fulton
- Hamilton
- Saratoga
- Warren
- Washington

## Methodology

The 81 question survey was developed through a collaborative effort by a seven-member ARHN subcommittee during the Fall of 2012. The seven volunteer members are representatives of county public health departments and hospitals in the region that are involved in the ARHN. Subcommittee members were responsible for identifying the broad research questions to be addressed by the survey, as well as for drafting the individual survey questions.

Subcommittee members were also charged with identifying potential respondents to participate in the survey. Because each county in the region is unique in its health care and service-provision structure, ARHN members from each of the counties were asked to generate a list of relevant stakeholders from their own communities who would represent the full range of programs and service providers. As such, the survey population does not necessarily represent a random sampling of health care and service providers, but an attempt at a complete list of the agencies deemed by the ARHN to be the most important and representative within the region.

The survey was administered electronically using the web-based Survey Monkey program and distributed to an email contact list of 624 individuals identified in the stakeholder list created by the subcommittee. Two weeks before the survey was launched on December 5, 2012, an announcement was sent to all participants to encourage participation. After the initial survey email, two reminder notices were also sent to those who had not yet completed the survey. Additionally, participation was also incentivized through an opt-in gift card drawing, with 20 entrants randomly selected to receive a \$25 Stewarts gift card at the conclusion of the survey. Ultimately, 285 surveys were completed during the six-week survey period, a response rate of 45.7 percent.

## Profile of Survey Respondents

The tables in this section do not provide survey results, but instead provide a summary overview of the composition of survey participants. The representativeness of the survey participants as a true sample of health organizations in the region is dependent upon the mailing list compiled by ARHN and the willing and unbiased participation of the stakeholders that received the survey invitations.

Survey participants represent a diverse array of different agencies, population groups, and service-areas within the overall eight-county ARHN region. Below, Table A.1 shows the primary functions selected by respondents and Table 2 shows the populations that their agencies serve. Health care and educational agencies are well represented, and the majority provides services to children and adolescents, as well as people living at or near the poverty level.

**Table A.1. Primary functions indicated by survey respondents**

Organization Primary Function	Percent of all applicants
Health care	36.8
Education	36.5
Behavioral health	17.5
Healthy environment	14.7
Early childhood svcs.	14.4
Social services	11.9
Senior services	11.2
Other services	9.1
Developmental disability svcs.	8.4
Employ & training	8.4
Housing services	8.1
STI/HIV prevention	6.0
Physical disability svcs.	4.9
Government agency	2.1
Testing and prevention	2.1

Note: Respondents could select more than one primary function.

**Table A.2. Populations served by survey respondent agencies**

Population Served	Percent of all respondents
Children/adolescents	59.6
People living at or near poverty level	50.9
Seniors/elderly	44.9
People with disabilities	38.9
People with mental health issues	32.3
Women of reproductive age	31.9
People with substance abuse issues	25.6
Specific health condition or disease	24.6
Farmers	14.0
Migrant workers	11.2
Other	10.5
Specific racial or ethnic groups	8.4
Specific geographic area	5.3
Everyone	5.3
Specific age group	3.5

Note: respondents could select multiple populations.

Table A.3 shows the percent of respondents that provide services in each of the eight counties in the region. Most respondents represent health care service providers that work in multiple counties within the region. As the table illustrates, between roughly 18 and 30 percent of all respondents work in each county, which provides a significant level of overlap in services.

**Table A.3. Percent of respondent agencies providing service in each county in the region**

County	Percent
Essex	30.2
Franklin	29.1
Fulton	22.8
Warren	20.4
Hamilton	19.6
Washington	19.6
Clinton	18.6
Saratoga	18.2

## Results

The findings are presented by thematic area: health trends, prevention agenda priorities, and technology trends and regional challenges. Additionally, within the Health Prevention Priorities section the results are detailed by the five areas of the NYS Department of Health Prevention Agenda, which are as follows:

- **Prevent chronic disease.** Focus on heart disease, cancer, respiratory disease, and diabetes and the shared risk factors of diet, exercise, tobacco, alcohol, and associated obesity.
- **Promote a healthy and safe environment.** Focus on environmental quality and the physical environment where people live, work, play, and learn.
- **Promote healthy women, infants, and children.** Focus on improving the health of women and mothers, birth outcomes, and child health including oral health.
- **Promote mental health and prevent substance abuse.** Focus on primary and secondary prevention and strategies for increasing screening to diagnose and connect people to needed services.
- **Prevent HIV, STIs, and vaccinate for preventable diseases.** Focus on preventing HIV, sexually transmitted infections, and preventable diseases via immunization.

Both quantitative and qualitative responses are summarized to present an overview of the respondents' perceptions of health care trends, the relevance of the priorities, the magnitude of difficulty faced by the region, areas of need, and the effectiveness of current efforts.

## Emerging Health Trends

Survey respondents were asked two major questions about emerging community health trends: the first was an open-ended query about the most significant trend emerging over the next three years, while the second asked respondents to identify populations that need targeted efforts to address emerging health trends. Responses to the open-ended question were examined and coded into thematic categories in order to identify general areas of growing concern in the region. Table 1 shows the percentage of those who provided a response to the question who identified a trend within each thematic area. Because many respondents identified more than one emerging trend, the percentages do not add to 100.

*By a large margin, the dominant trend emerging in the region is obesity, followed by growing substance abuse, mental health issues, and a declining availability of services and insurance coverage for community residents.* The theme of chronic disease, which was cited by 5.4 percent of respondents, included trends of increasing cases of cancer, COPD (chronic obstructive pulmonary disease), heart disease, and other conditions that require ongoing or intensive care that is not always available in rural communities. Mentions of sexually transmitted infections (STIs) or diseases (STDs) were not dominant, despite the fact that the theme is similar to the identified NYS priority area.

**Table 1. Percent selecting general emerging health trend**

Theme	Percent
Growing obesity, childhood obesity, and related ailments	25.5
Substance abuse (alcohol, drugs, prescriptions)	16.2
Mental health issues	15.8
Lack of service availability, lack of insurance	13.1
Aging population / need for senior care	10.8
Increase in chronic diseases	5.4
Increasing STI/STD cases in community	5.4
Other	34.7

Total percentage is greater than 100 because more than one category could be identified

As shown in Table 2, many of the population groups identified as being in need of targeted efforts are reflected in the previous emerging themes. *Three of the top five population groups selected by respondents for targeting are: people with mental health issues, seniors/elderly, and people with substance abuse issues.* The two groups mentioned by a majority of respondents—people living in poverty and children/adolescents—are general groups of individuals who were frequently associated with emerging health issues in the open-ended question. For example, themes were sometimes listed as growing amongst children (e.g. childhood obesity, teen drug use) or related to an increase in regional poverty. Again, because survey respondents were allowed to select more than one group of individuals to target, the cumulative percentages exceed 100.

**Table 2. Populations in need of targeted service efforts**

Population group	Percent selecting
People living at or near poverty level	56.5
Children/adolescents	53.7
People with mental health issues	42.8
Seniors/elderly	39.6
People with substance abuse issues	37.5
People with disabilities	27.4
Women of reproductive age	26.3
Specific health condition or disease	22.5
Specific racial or ethnic groups	10.5
Migrant workers	5.3
Farmers	3.9
Everyone *	3.9
Other	3.9
Don't know	1.8

\* Dominant write-in selection under other.

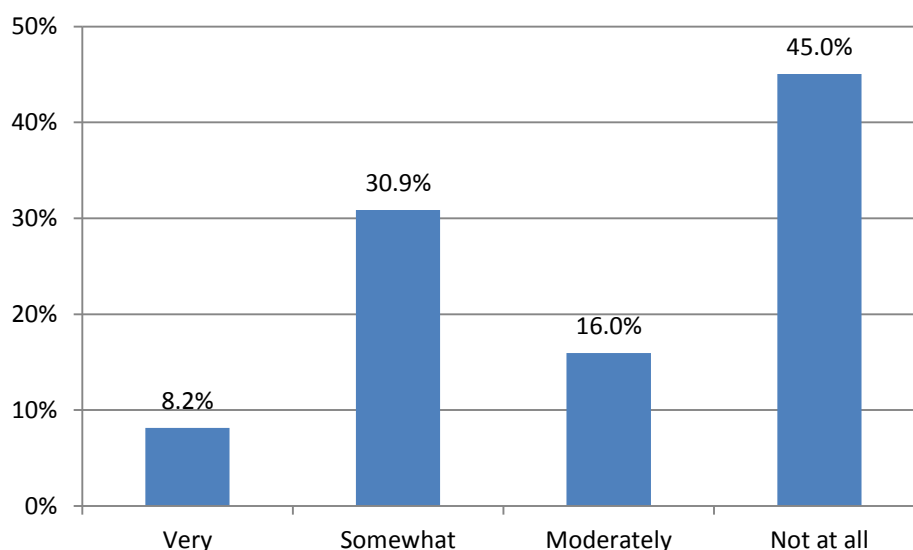


## Health Prevention Agenda Priorities

Most of the survey items focus on identifying perceptions and needs within the region related to the five priorities selected by the NYS Department of Health Prevention Agenda. This section begins with a summary of service provider perceptions on how relevant these priorities are to the needs of their community, as well as the effectiveness of current efforts to address the issue. The latter part of this section presents data specific to each priority area: the strategies being employed, the local populations in need of targeted efforts, and a summary of any unique perspectives from the field.

Respondents were queried about their awareness of the NYS Department of Health (NYSDH) Prevention Agenda. *Slightly over half (50.9 percent) indicated that their organization was already aware that the Department of Health has a prevention agenda; 30.2 percent indicated that their organization was not aware and 18.9 percent indicated that they were not sure.* Those who selected “don’t know” would seem to be indicating that while the respondent was not aware of the agenda, they felt it was possible that other leaders within the organization were aware. When survey respondents were asked about their own personal knowledge of the agenda, they indicated limited overall familiarity. As shown in Chart 1, 45 percent indicated that they were not at all familiar with the agenda, while only 8.2 percent were very familiar with the agenda. Obviously, for many of the survey respondents, their first exposure to the priority agenda focus areas occurred through participation in the ARHN survey.

**Chart 1. Respondent ratings of own familiarity with the NYSDH Prevention Agenda**



The ratings of priority area relevance should reflect both the unique needs of the respondent’s region (which may vary from NYS as a whole) and the mix of service providers who completed the survey. Respondents were asked to rank order the five priorities from most to least important. Interestingly, the results shown in Table 3 indicate a slightly different perspective in priorities than was revealed by the earlier write-in question about emerging health trends. *The “prevent chronic disease” priority area was identified as the most important for the region, with nearly 40 percent selecting the priority as most important and approximately 19 percent selecting it as the second most important.* The health priority area involving the “promotion of mental health” and the “prevention of substance abuse” was ranked

most important by the second largest portion of respondents, 22.5 percent, and also was selected as the least important priority area by the smallest share of survey-takers, only 3.5 percent. At the other end of the spectrum, the priority area of “preventing STIs and promoting vaccines” was selected as most important by only 4.2 percent of respondents and selected as least important to the region by a majority of respondents, 62.3 percent.

**Table 3. Priority areas by percent of respondents selecting ranking of importance to the region**

	Importance ranking				
	Most	2nd	3rd	4th	5th
Prevent chronic disease	39.7	19.2	13.2	16.7	10.9
Promote mental health; prevent substance abuse	22.5	23.1	24.5	26.4	3.5
Promote healthy, safe environment	22.1	22.7	21.4	17.1	16.7
Promote healthy women & children	11.5	31.5	34.2	16.7	6.6
Prevent HIV/STIs; promote vaccines	4.2	3.5	6.6	23.3	62.3

In addition to ranking the importance of the five major NYS priority categories, respondents were also asked to select up to five specific issues most important to their service area. Although the option to select up to five areas of importance, along with the opportunity to write-in another option, allowed for a liberal interpretation of the “most important” issues, there was a clear division between the issues. The issues most frequently selected by respondents are shown in Table 4.

*The issues that were identified as most important or most relevant as selected by around half of all survey respondents were: promoting a healthy and safe environment, preventing diabetes, prevention of substance abuse, and mental health screening.* Once again, although the ordering was not entirely consistent with the findings from previous survey questions regarding regional priority areas, there were commonalities in the presence of the issues of “preventing diabetes” (a chronic condition), “prevention of substance abuse,” “mental health screening,” and the “promotion of a safe and healthy environment.” Additionally, “preventing HIV and STIs” was once again ranked relatively low, with only 4.9 percent selecting the issue as among the most important.

**Table 4. Percent selecting specific issues as most important or relevant to their service area**

Issue	Percent selecting issue
Promoting a healthy & safe physical environment	50.9
Preventing diabetes	48.4
Prevention of substance abuse	44.9
Mental health screening & connection services	44.9
Preventing heart disease	39.3
Improving child health	37.9
Improving the health of women & mothers	33.0
Preventing cancer	31.9
Preventing respiratory disease	28.1
Immunizing against preventable diseases	23.2
Promoting environmental quality	21.4
Improving birth outcomes	12.6
Preventing HIV & STIs	12.3
Other	4.9

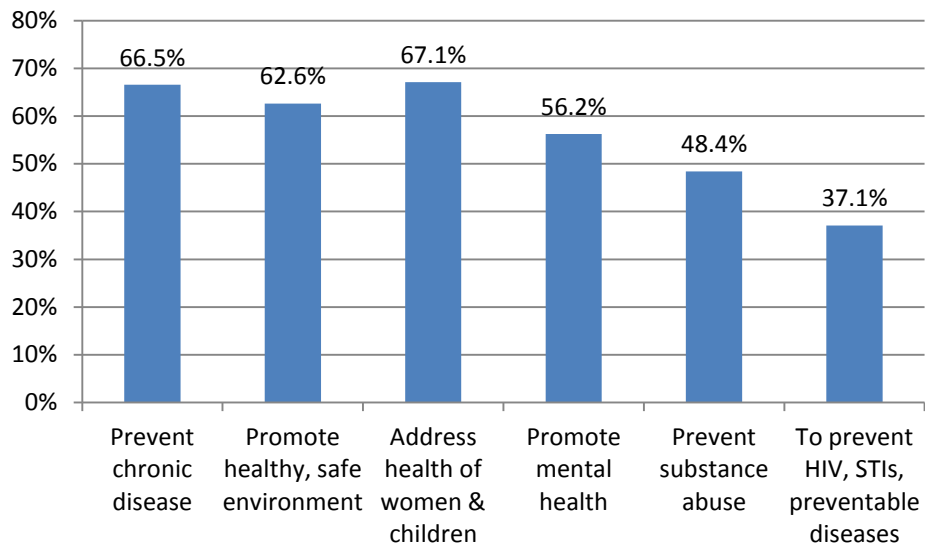
Another way of gauging the relevance of the five priority areas to the region is whether or not health agencies and service providers are already involved in efforts to improve related conditions within their own service areas. Survey respondents were asked about agency involvement in issues relating to the priority areas. Additionally, for each priority area, survey respondents were also asked whether or not their agency would be interested in collaborating on efforts to address the issue if it was selected as a priority community health issue for the Adirondack region. A summary of the results is presented in Chart 2 and Chart 3.

*Agency involvement was highest for efforts to address the health of women and children, followed by efforts to prevent chronic disease, and efforts to promote a healthy and safe environment in the community* (Chart 2). Involvement was least prevalent in efforts to prevent HIV, STIs and vaccine-preventable diseases, which only 37.1 percent of survey respondents indicated was an area of activity for their agency. For the priority area of promoting mental health and preventing substance abuse, the level of involvement was in the middle; 56.2 percent of respondents worked for agencies involved in mental health promotion efforts and a somewhat smaller portion were involved in substance abuse prevention efforts.

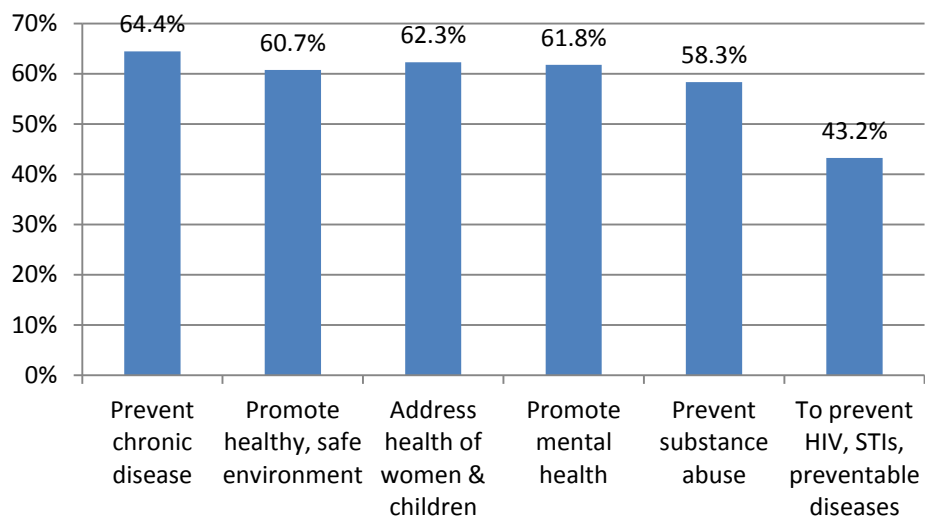
*A majority of survey respondents indicated that their agency would be interested in collaborating to address most priority area issues if it was selected as a priority within the region* (Chart 3). The exception was the prevention of HIV, STIs, and vaccine preventable diseases, which only 43.2 percent of respondents indicated would be an issue their agency would be willing to collaborate on. This suggests that HIV, STI, and vaccine preventable disease efforts are either an area of low interest for the region's health care and service providers or that many feel they do not have the capacity or expertise to be

involved in the issue. The lack of interest neatly corresponds with the limited current involvement with the issue that was illustrated in Chart 2.

**Chart 2. Percent indicating agency currently involved with issue**



**Chart 3. Percent interested in collaborating if issue is selected as a priority for the region**



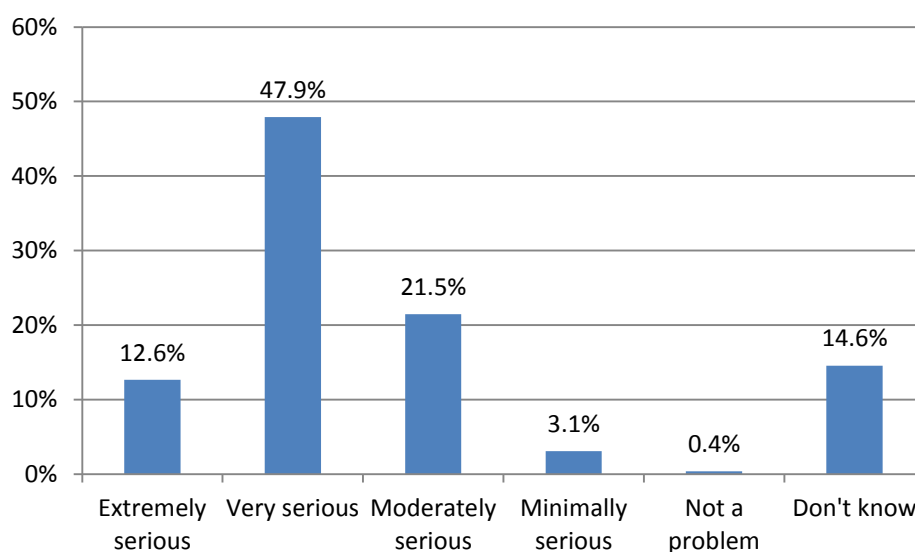
### Priority Area Strategies and Effectiveness

This section of the report details survey responses that are specific to each of the five different priority areas. While the previous section summarizes relative importance, involvement, and level of community need across the priority areas, this section focuses on how health agencies and other service providers have been addressing issues related to the priority areas, the perceived effectiveness of existing efforts at their own and other agencies, and the level of interest in becoming involved with collaborating on future efforts.

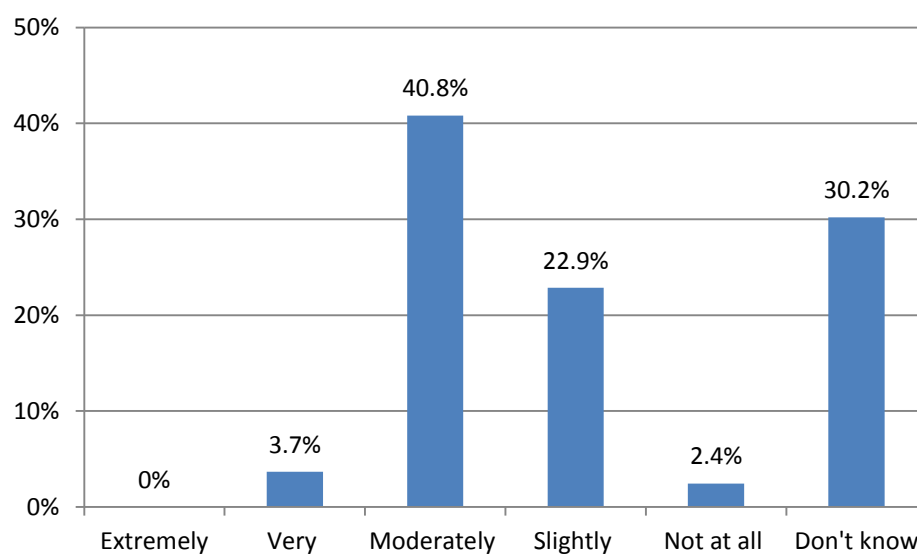
### Area 1: Prevent chronic disease

As shown earlier, a large portion of survey respondents believe that prevention of chronic disease is the most important and relevant priority area for the region (Table 3). This high prioritization may be related to the severity of chronic disease as a problem in the region. Chart 4 illustrates how respondents view the severity of the problem of chronic disease. *More than half indicated that the problem of chronic disease is either “very serious” or “extremely serious” while only 0.4 percent indicated that chronic disease is not a problem.* These ratings suggest that chronic disease is a more severe problem than the issues associated with the four other priority areas.

**Chart 4. Rating of severity of chronic disease as a problem by share of respondents**



*One concern may be that effective programs to target chronic disease are limited in the region.* None of the survey respondents indicated that existing efforts were extremely effective and only 3.7 percent rated them as very effective (Chart 5). Additionally, approximately 30 percent indicated that they did not know about the effectiveness of any area programs, which suggests that they may be limited in visibility or even absent from some parts of the region. Among those that provided statements on how these efforts might be improved, education and awareness were the most common themes, though many also noted that reducing chronic disease would require lifestyle changes, which would neither be easy nor quick to accomplish. It was also mentioned that growing poverty and shrinking budgets for programs targeting prevention were already hampering efforts to address problems like diabetes and obesity. When asked who should be targeted by efforts to address chronic disease, the majority identified persons living at or near poverty level, followed by senior citizens.

**Chart 5. Rating of chronic disease effort effectiveness by share of respondents**

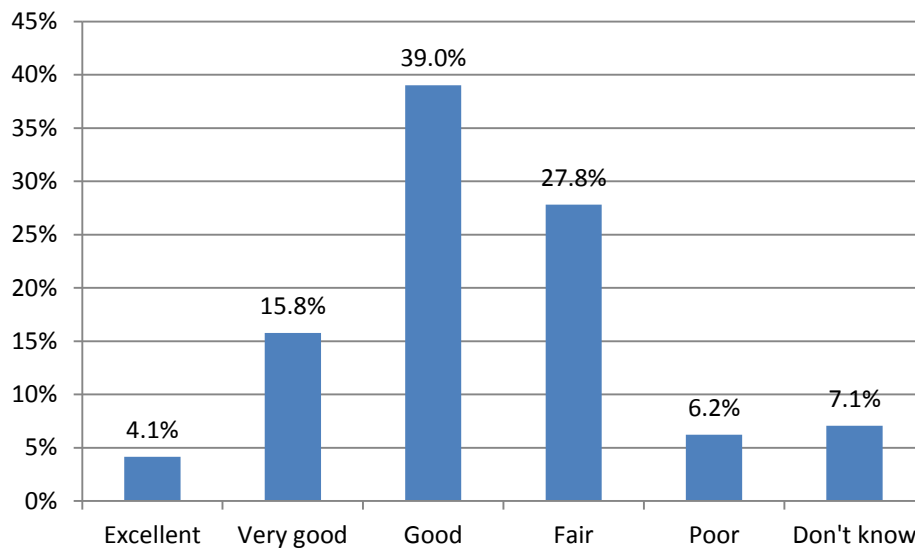
Survey respondents were also asked to provide one or two top strategies being employed in the region by their agency to address chronic disease. *An analysis of open-ended responses revealed that educational efforts were the most common strategy to address chronic disease, followed by service coordination and cooperation efforts, and awareness promotion and service marketing* (Table 5). Note that because many respondents reported agency engagement in more than one strategy, the cumulative values shown in Table 5 exceed 100 percent.

**Table 5. Percent reported as engaged in strategy to address issue of chronic disease**

Strategy	Percent
Education (treatment options, prevention, risk factors)	41.8%
Service coordination, cooperation between agencies	14.4%
Promotion & marketing, community awareness campaigns	12.4%
Screening or testing (e.g. cancer, diabetes)	11.1%
Clinics operation, provision of basic medical services, home services	11.1%
Policy advocacy	11.1%
Drug abuse treatment programs, smoking cessation programs	3.9%
Other	23.5%

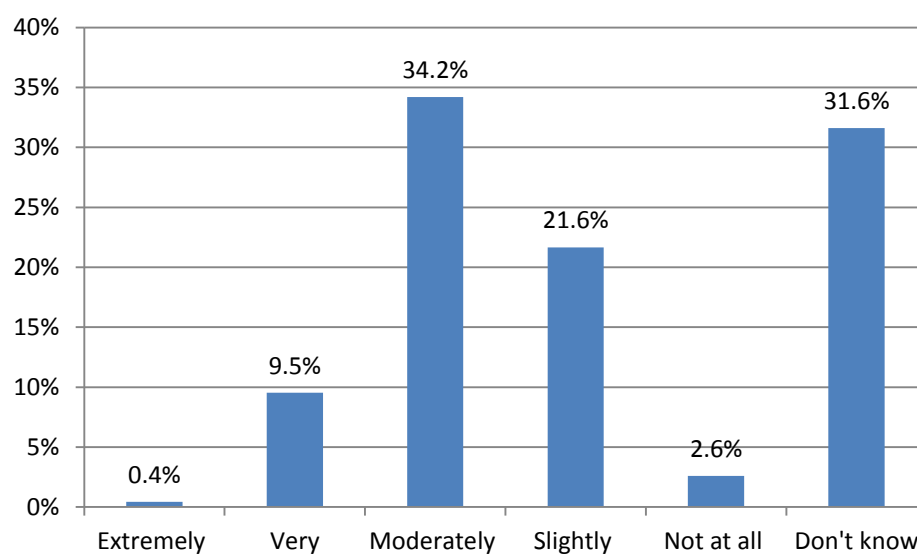
### ***Area 2: Promote a healthy and safe environment***

*As stated previously, the priority area of promoting a healthy and safe environment was ranked by survey respondents as being very important in terms of its relative importance for the region; however, respondents provided a generally moderate assessment of current conditions.* A plurality of respondents, 39 percent, rated the overall health and safety of the region “good,” followed by 27.8 percent who selected the rating of “fair” (Chart 6). Few respondents selected ratings at either end of the ratings scale: 6.2 percent rated the region’s overall health and safety as poor and less than one percent described conditions as excellent.

**Chart 6. Rating of overall regional health and safety by share of responses**

Most respondents also provided only moderate rankings on the effectiveness of existing efforts to promote a healthy and safe environment. As shown in Chart 7, more than one-in-three respondents indicated that existing efforts are moderately effective, followed by approximately one-in-five who indicated that existing efforts are only “slightly” effective. A high portion of respondents, 31.6 percent, indicated that they don’t know about the effectiveness of any current efforts to promote a healthy safe environment, which suggests that in some service areas such efforts are either poorly publicized or absent. Overall, the ratings seem to suggest that room exists for improvement in the programs that currently exist. When asked how current efforts could be improved, many respondents stated that they didn’t know and several also suggested that there were not many efforts or that there was not enough follow through. Other respondents also suggested that increased coordination and more broad, community-level efforts were necessary.

As was the case with the chronic disease priority area, *the most prevalent strategy employed by respondent agencies to promote a healthy and safe environment was education*. When asked to provide one or two top strategies used by their own agency, 30.9 percent of respondents identified an activity associated with education of area residents on issues related to health and safety (Table 6). Other popular strategies included providing physical improvements in the community, coordinating with other agencies, and policy advocacy. The most commonly identified population groups for targeted efforts to improve general health and safety were people living at or near poverty, children and adolescents, and senior citizens.

**Chart 7. Rating of effectiveness of existing efforts to promote health and safety by share of responses****Table 6. Percent reported as engaged in strategy to promote health and safety**

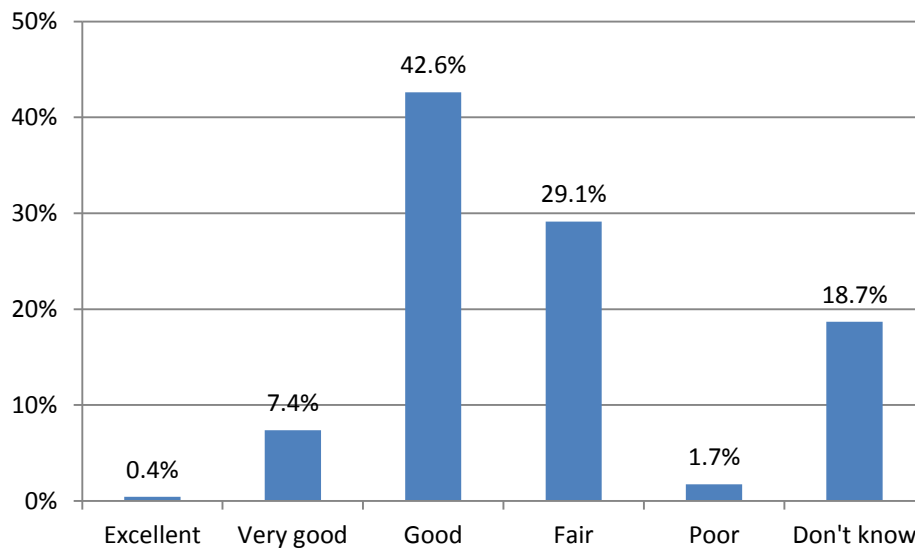
Strategy	Percent
Education (prevention and health ed., worker training)	30.9
Provide physical improvements (equipment, housing improvements, sidewalks and trails, community assets)	18.7
Service coordination, cooperation between agencies	15.4
Policy advocacy, create and implement safety rules	10.6
Exercise, food, and cooking programs	9.8
Inspection (safety), regulatory enforcement	8.1
Services for children, WIC, child care	8.1
Promotion & marketing, community awareness campaigns	6.5
Other	21.1

### ***Area 3: Promote healthy women, infants, and children***

The overall health of women, infants, and children was rated similar to that of the overall health and safety of the region: *most gave a rating of “good” or “fair” with few selecting the highest or lowest ratings* (Chart 8). Once again, a somewhat high portion of respondents, 18.7 percent, indicated that they did not know about the health of women, infants, and children in the region. The prevalence of “don’t know” responses throughout the survey suggests that many stakeholders have not been informed about other health care efforts going on in the region. Also, very few described conditions as either excellent or poor.

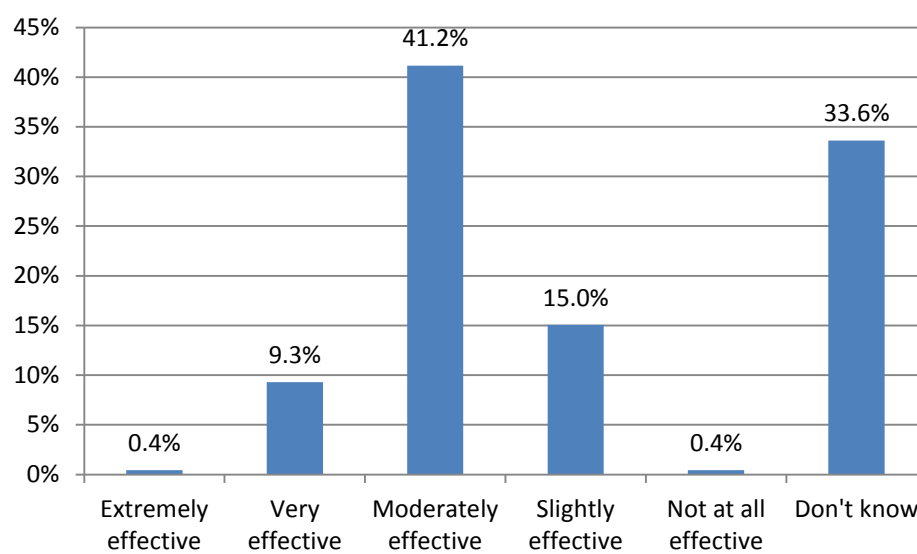


**Chart 8. Rating of overall regional health of women, infants, and children**



*The largest portion of respondents, 41.2 percent, rated the effectiveness of current efforts to promote the health of mothers, infants, and children were rated by the as moderately effective, followed by 33.6 that indicated that they don't know about the effectiveness of current efforts (Chart 9). The large portion of respondents that indicated a lack of knowledge about the effectiveness of current efforts was surprising given that 67.1 percent previously indicated that their own agency was already involved with the issue (Chart 2). Effectiveness ratings at either extreme of the scale were almost non-existent, though 15 percent indicated that existing efforts are slightly effective and 9.3 percent described current efforts as very effective. Overall, the survey suggests that current efforts are middling and unknown to many.*

When asked how current efforts to address the health of mothers, infants, and children could be improved, respondents provided a wide range of responses. Comments in favor of increasing education and outreach efforts were common, particularly around sex education and pregnancy prevention. Many respondents also noted specific health services that needed to be made more accessible, especially dental services for children. Not surprisingly, the population groups identified as being in need of targeting for this Health Agenda area were women of reproductive age, people in poverty, and children and adolescents.

**Chart 9. Rating of effectiveness of existing efforts to promote health of women, infants, and children**

As shown in Table 7, the most common agency strategy used to address the health of women, infants, and children was education programs—particularly those aimed at mothers, such as breastfeeding classes, nutritional classes, and courses on child care skills or health. Other popular strategies included home visiting and assessment programs, the direct provision of medical care services, and food assistance programs such as WIC. Policy advocacy and awareness or publicity campaigns were mentioned, but less prevalent than for other priority areas.

**Table 7. Percent reported as engaged in strategy to promote health of women, infants, and children**

Strategy	Percent
Education (breastfeeding, nutrition, child care skills)	49.2
Home visiting programs, assessment and referral services	18.9
Medical care services	16.4
Food assistance, formula, WIC program	10.7
Awareness campaigns	6.6
Daycare and preschool programs	2.5
Policy advocacy	2.5
Other	23.8

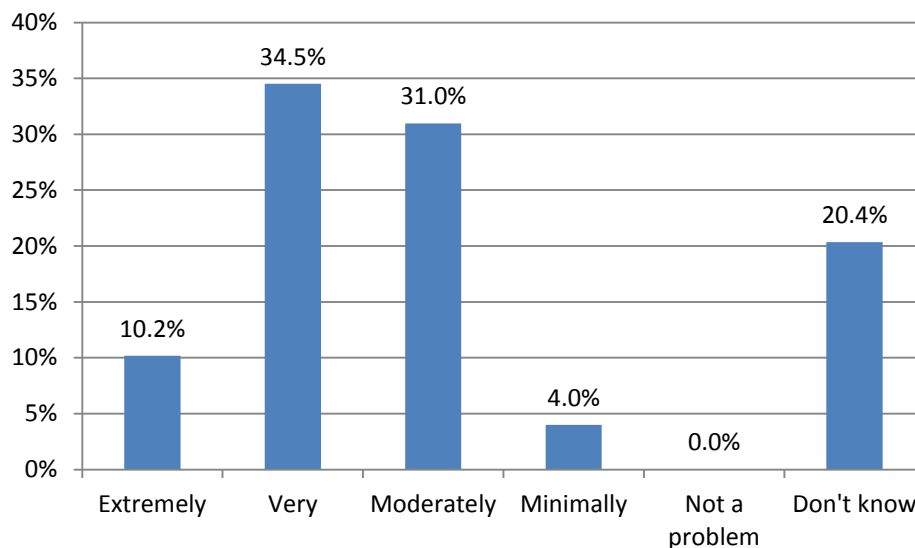
#### **Area 4: Promote mental health and prevent substance abuse**

The “promote mental health and prevent substance abuse” priority area differs slightly from the other priority areas in that it includes two relatively distinct types of ailments: mental illness and drug and alcohol abuse. As a result, the survey separates the major issues of the priority area in many of the questions. An example of the division into separate mental health issues and substance abuse issues was previously reported earlier in the section (see Chart 2 & 3).

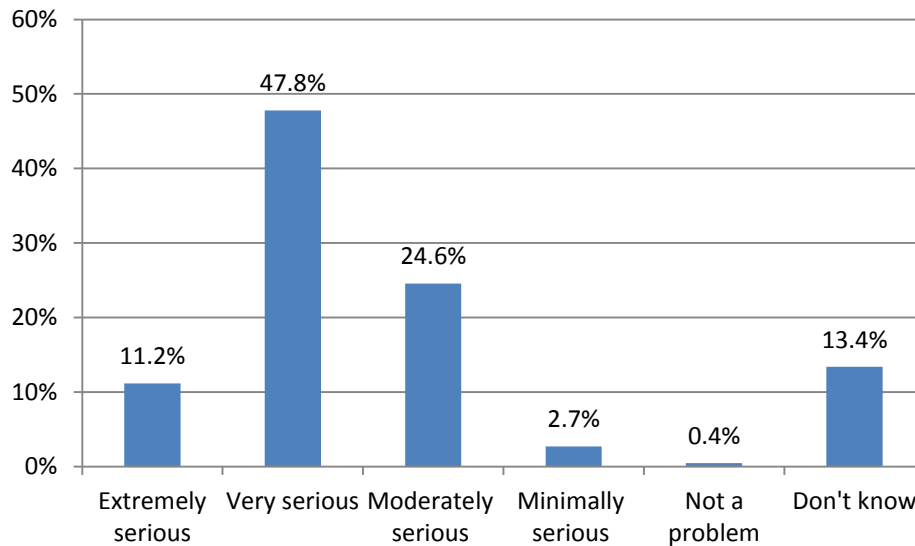
*In general, most survey respondents indicated that both mental health and substance abuse are problematic for the region.* Chart 10 summarizes the respondent's ratings on the severity of untreated mental illness and Chart 11 summarizes ratings of the severity of substance abuse problems. The largest portion, 34.5 percent, indicated that untreated mental illness is a very severe problem, followed by 31 percent who view the problem as moderately severe, and 10.2 percent who see the problem as extremely severe. Substance abuse was rated as an even more serious problem for the region, as nearly half of all respondents described the problem as very severe. Of course, it should be noted that there were also signs that the extent of both problems is not universally understood by health and service providers. A lack of knowledge about the severity of the issue was cited by respondents roughly 20 percent of the time on the issue of untreated mental illness and by 13.4 percent of respondents in regards to the issue of substance abuse.

The extent to which untreated mental illness and substance abuse are seen as regional problems exhibits a pattern similar to the importance rankings of other issues previously reported in Table 3. Untreated mental illness and substance abuse are both problematic, but are rated at a level of severity that is behind that of chronic disease.

**Chart 10. Rating of severity of problem of untreated mental illness by share of respondents**

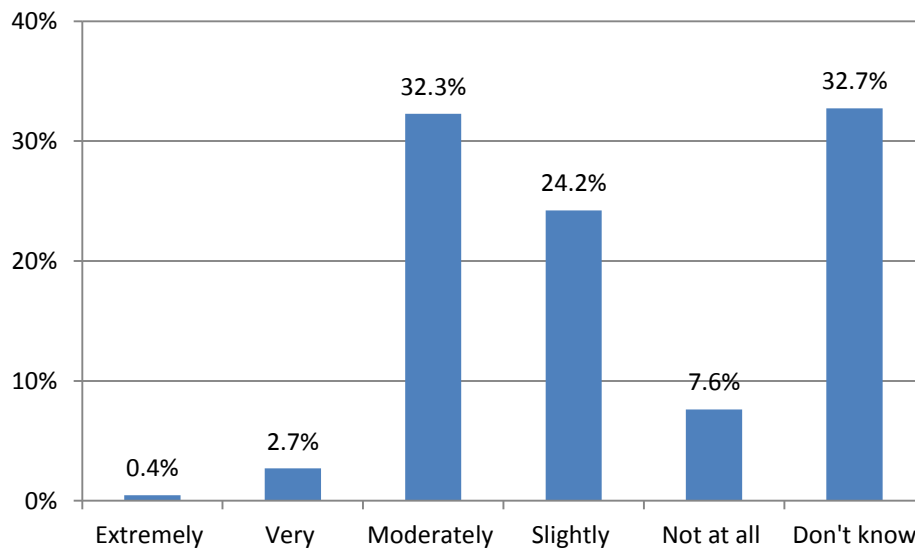


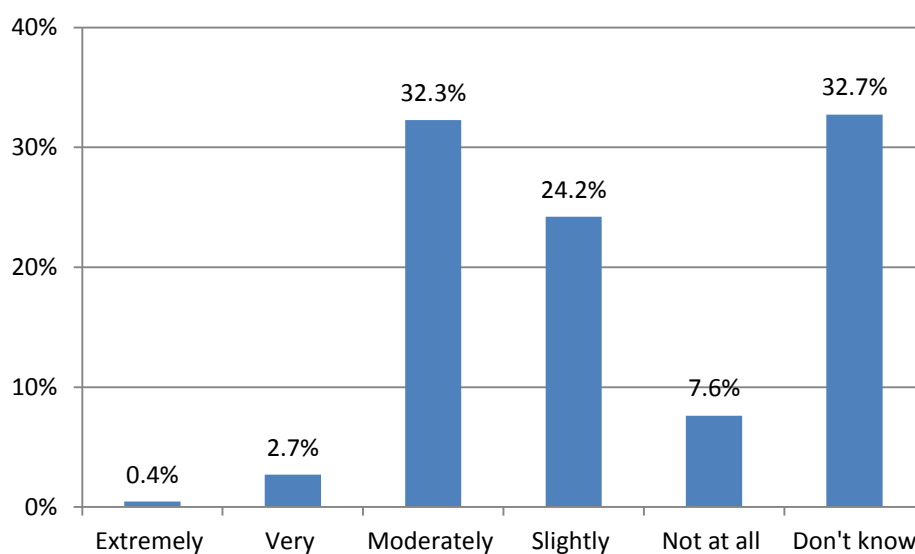
**Chart 11. Rating of severity of substance abuse as a problem by share of respondents**



*Survey respondents frequently indicated that they don't know about the effectiveness of current efforts to promote mental health and current efforts to prevent substance abuse. As shown in Chart 12 and 13, ratings of "extremely" or "very" effective were rare; most survey respondents selected ratings of "moderately" effective or lower, and roughly one-third simply indicated that they didn't know. The results suggest both a poor perception of mental health and substance abuse programs in the region, as well as a possible lack of programs, given the limited knowledge of effective efforts demonstrated by a survey group primarily comprised of health care and service professionals.*

**Chart 12. Rating of effectiveness of existing efforts to promote mental health**



**Chart 13. Rating of effectiveness of existing efforts to prevent substance abuse**

Respondents were also asked how current regional efforts in both substance abuse prevention and mental health promotion could be improved. In a reflection of the ratings shown in Charts 12 and 13, many simply skipped the question or responded that they were unsure. For mental health promotion, a need for increasing the number of providers and screeners was often mentioned, as was the need to reduce stigma around mental illness in general. Suggestions for improving substance abuse prevention efforts were similar, with demands for increases in funding for services and additional counselors and treatment resources. Population groups identified as being in need of targeting were straightforward and obvious: a majority simply indicated people with mental health issues and people with substance abuse issues.

By a small margin, *the most common strategy for promoting mental health reported by survey respondents was in the category of education, followed by the direct provision of mental health and counseling services* (Table 8). The other two major types of strategies frequently listed by respondents were in the categories of assessment, screening, and referral services, and collaboration or coordination efforts with other agencies in the region.

**Table 8. Percent reported as engaged in strategy to promote mental health**

Strategy	Percent
Education (Mental health awareness, training for providers)	32.4
Counseling, behavioral health care, and clinical services	31.4
Assessment, screening, and referrals	21.6
Collaboration, coordination with regional mental health programs and service providers	18.6
Other	26.5

As shown in Table 9, *the most common substance abuse prevention strategy was education, cited by 56 percent of respondents*. Examples of educational strategies included prevention programs targeting children, materials explaining the dangers of substance abuse, and training on identifying and dealing with substance abusers in the community. Coordination or collaboration with other agencies was the second most common strategy, with roughly one-in-five respondents indicating their agency primarily worked with other organizations to address substance abuse. In general, it appears that direct approaches to treating substance abuse are not common in the region; screening and referral services, as well as direct counseling or clinical treatment services, were each only cited by 13.2 percent of survey takers that indicated agency efforts in the substance abuse area.

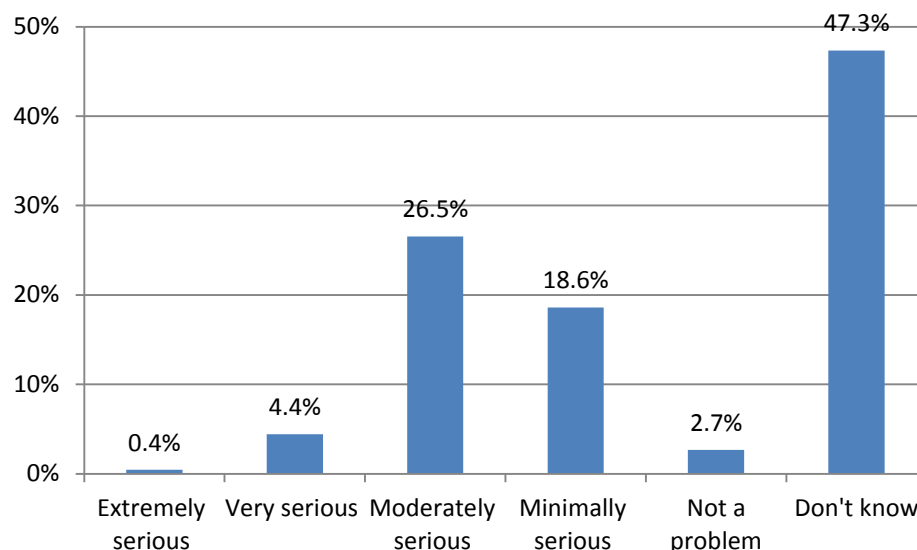
**Table 9. Percent reported as engaged in strategy to prevent substance abuse**

Strategy	Percent
Education (awareness, prevention, and identification materials)	56.0
Coordination and collaboration efforts with other agencies and programs	20.9
Screening and referrals to substance abuse treatment services	13.2
Substance abuse treatment and counseling services	13.2
Policy advocacy, develop or implement regulations	8.8
Other	17.6

#### ***Area 5: Prevent HIV, STIs, and vaccine preventable diseases***

*As a priority area, HIV, STI, and vaccine preventable diseases was rated by survey respondents as a less serious problem relative to issues in the other four priority areas.* This corresponds with the findings, discussed earlier, that the area of HIV, STI, and vaccine preventable diseases had both the lowest level of current efforts from surveyed agencies, as well as the lowest level of interest for potential collaboration if selected as a priority area for the region (Chart 2 & 3).

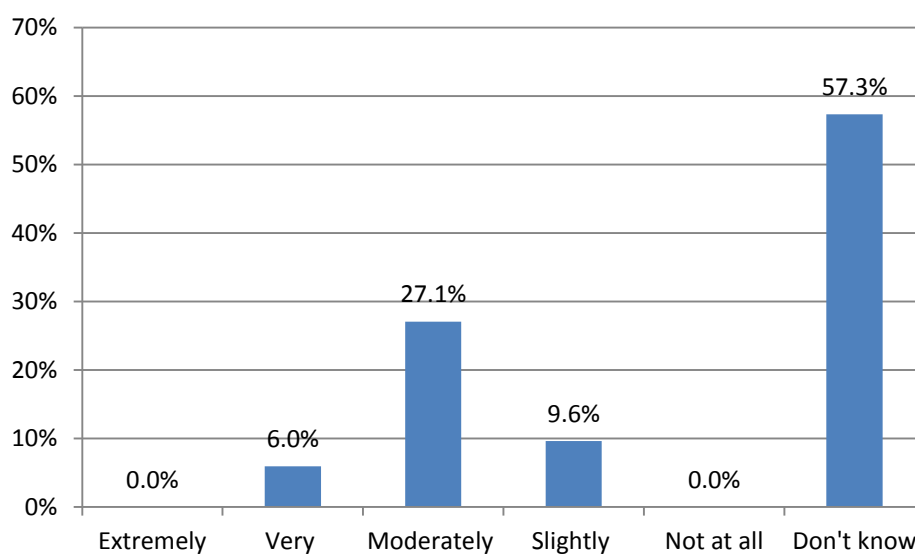
Not surprisingly, given the lower level of involvement and interest in the issue area, fully 47.3 percent indicated that they did not know enough to rate the severity of the problem in the region (Chart 14). Among those that did provide a rating, the most popular choices were moderately or minimally serious; less than 1 percent of respondents indicated that HIV, STIs, and vaccine-treatable diseases are an extremely serious problem.

**Chart 14. Rating of severity of HIV, STIs and vaccine preventable diseases as a problem by share of respondents**

In addition to not being aware of the extent that HIV, STIs, and vaccine preventable diseases are a problem in the region, survey respondents also broadly indicated that they were not knowledgeable about the effectiveness of any existing efforts to address the problem. A majority of respondents could not rate the effectiveness and most of those that could selected only a moderate rating (Chart 15). The response pattern on this question indicates that health care and service agency stakeholders in the region are less aware of both regional need and current efforts related to this priority area than for any of the four other priority areas.

When queried about areas for improvement, education and awareness were frequent themes; however, more than one respondent indicated that they did not feel that HIV or other similar ailments were a widespread problem for the region. Some also mentioned that there was a need for better data on the extent of the problem for the region. Responses to the question about what populations were in need of targeting also revealed a lack of knowledge about the subject, with “don’t know” being the third most popular response behind children and adolescents, and women of reproductive age.

*For respondents that indicated that their agency is involved with an HIV, STI, or vaccine preventable disease efforts, the most common strategy employed was education, followed by screening, testing, and referral services, and offering immunization clinics (Table 10). A few others also indicated that compliance with regulations to prevent disease transmission was a strategy, and a few also indicated that their agency provides clinical services to treat HIV, STIs, or other vaccine preventable diseases.*

**Chart 15. Rating of effectiveness of current efforts to prevent HIV, STIs, & vaccine preventable disease****Table 10. Percent engaged in strategy to prevent HIV, STIs, or vaccine preventable disease**

Strategy	Percent
Education (Prevention techniques, sex ed, recognition)	60.6
Screening, testing, and service referrals	31.0
Immunization clinics	18.3
Clinical treatment program	9.9
Rule compliance to inform and prevent transmission	5.6
Other	22.5

## Technology Use and Upcoming Regional Challenges

At the end of the survey respondents are asked about the use of technology and were given the opportunity to identify any unique challenges they may be facing over the next few years. This section details these findings providing some insight into possible regional needs and priorities that may not have fit into the five priority areas already identified in the larger state health agenda.

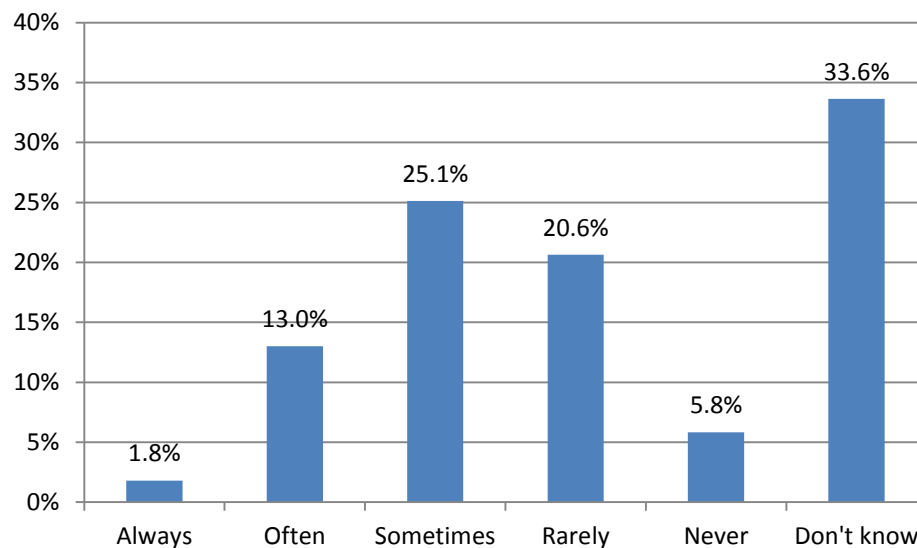
### *Technology use and prioritization*

Survey respondents were asked to rate two aspects of technology in the region: how much technology is currently used and how relevant technology and communication enhancement is as a priority specifically for the Adirondack region. Chart 16 illustrates the extent to which survey respondents indicated that the clients of their agency use technology, such as the internet or information kiosks, to access lab results, address billing issues, or submit questions and communicate with the agency. A large portion, approximately one-third, indicated that they don't know, which may simply reflect the fact that the individuals that received the survey are not directly involved with technical aspects of their agency's day-to-day operations. Among those that were able to assess the frequency of technology usage, most



selected a low-usage rating, with one-in-four indicating that clients sometimes use technology and one-in-five indicating that clients rarely use technology.

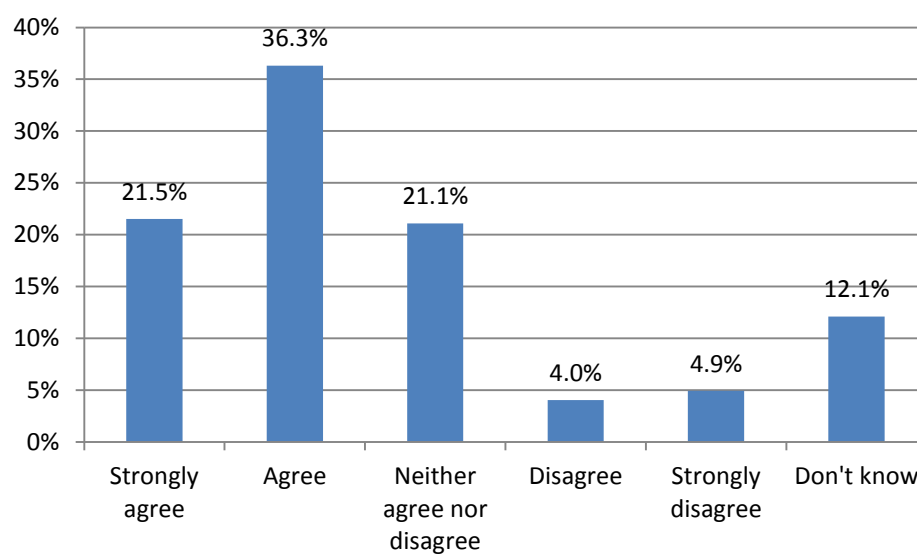
**Chart 16. Rating of frequency of technology use by agency clients by share of respondents**



*The was also a relatively high overall level of support for making the enhancement of technology one of the top five priorities for the region.* Over half of all respondents agreed that enhancing technology should be a priority (Chart 17). Additionally, only about 9 percent of respondents indicated any level of disagreement. However, it should be noted that there was a substantial amount of ambivalence about the issue: just over 21 percent are on the fence and could neither agree nor disagree, and 12.1 percent indicated that they don't know enough to answer the question. The share of stakeholders that did not hold a strong opinion on the issue does suggest that support for the issue may grow, or opposition may increase, with additional information on a technology enhancement priority area for the region.

Respondents were also provided an opportunity to offer additional comments about technology; however, only 66 of the 285 chose to provide additional information. Interestingly, *although the numbers indicate high support overall, many of the comments were not supportive of pushing the use of technology in the region or expressed concerns about the utility or cost for rural health care providers.* Most concerns focused on the elderly and poor or rurally isolated residents, who might not have access to the internet or who might find the technology difficult to use. Others indicated that a lack of staff time or the cost of new technology could be difficult barriers for health agencies to overcome. In short, there is strong support for technology as a priority area; however, a smaller group of dissenting voices has serious concerns about the issue.

**Chart 17. Rating of agreement that enhancing technology should be among top five priorities**



### *Additional comments and challenges*

Throughout the survey, respondents were repeatedly given the opportunity to provide general comments and to provide additional information about topics, such as activities serving specific racial or health groups. Few provided comments and most did not provide information that adds to the core survey results. For example, a few noted that they provide services to Native American groups, and others occasionally listed major diseases such as diabetes or COPD that they frequently see in their work. At the end of the survey respondents were also provided with an opportunity to offer closing thoughts about the challenges facing their organization and the process of setting health priorities in an open-ended format. These comment sections were completed at a slightly higher rate: 162 respondents provided a comment on upcoming organizational challenges, but only 45 provided a comment on the process of setting priorities.

The comments on future challenges predominantly focused on funding issues, specifically declining reimbursements and reduced funding from public sources. According to the comments of survey respondents, many agencies in the region rely heavily on reimbursements from Medicare and Medicaid, or funding from grants and local taxes, which they expect to see decline in the near future. Some also cite workforce problems, particularly the ability to maintain a qualified health care workforce given skill shortages and rising wage and benefit expectations.

Regarding the process of setting community health priorities for the region, multiple survey respondents mentioned the importance of collaboration and communication. Others focused on the unique, rural nature of the region, and mentioned issues such as low volumes of clients, regulations that do not make sense, and a difficulty in achieving economies of scale as being problems specific to the area that should be considered when formulating priorities.

## Summary

The results of the ARHN survey reveal several major findings that can be used to guide future efforts to develop a set of unique regional health priorities. *First, survey respondents identified both regional needs and organizational preferences that clearly favored some of the NYS Health Agenda priority areas over others. The issue of chronic disease was identified as a problem area for the region and was selected by a large number as a being a top priority to address.* Additionally, many of the emerging trends for the region can be tied to a chronic disease priority area: an aging population, increases in obesity, and a rising rate of diabetes are all associated with long-term conditions that will challenge the health care system. At the other end of the spectrum, respondents also largely agreed that the HIV, STI, and vaccine preventable disease priority area is less important to the region. *Few respondents perceive HIV and STIs as being an emerging health threat in the region, and most ranked the issue as being the least important to the region overall.*

The second major finding that can be derived from the survey results is that *current efforts to address the problems associated with the five NYS Health Agenda priority areas are only moderately effective overall.* Very few respondents rated current efforts on any major issue as either “effective” or “very effective.” Instead most described current efforts as only slightly or moderately effective, if they provided ratings at all. Additionally, many current activities do not appear to take a hands-on approach to health issues. The most common agency strategies identified across all issues were educational in nature, and most suggestions for population-targeting simply identified groups that are already afflicted: i.e. targeting substance abuse prevention efforts at individuals with substance abuse issues.

*Finally, perhaps the most surprising finding was that a sizable portion of the health care stakeholders that responded to the ARHN survey indicated no knowledge about the Health Agenda priority areas or about major health issues within the Adirondack region.* Only about half of respondents indicated that their agency was familiar with the NYS Health Agenda priority areas and only 8.2 percent described themselves as being personally very knowledgeable about the agenda areas. Additionally, when asked about general current conditions, the portion of respondents that indicated that they “don’t know” how their own region was faring ranged from 7.1 percent who could not rate the overall health and safety of the region to 47.1 percent for who did not know the severity of the problem of HIV, STIs, and vaccine preventable diseases in the region. This suggests that at least some regional health care stakeholders are in need of additional data on community health conditions and improved connections with service agencies working on different issues.

### **Appendix 3:**

## **ARHN Survey Results: Washington County**

### **Washington County Survey Results**

This report details results from the Adirondack Rural Health Network (ARHN) survey that are specific to Washington County, New York. A full report covering survey findings for the entire eight-county region served by ARHN, *Results of the Adirondack Rural Health Network Survey: Regional Results Summary*, accompanies this report and provides greater detail on the preferences and directions expressed by respondents for the region as a whole, including Washington County.

### **Survey Overview and Methodology**

This report details the findings of a survey conducted by the Center for Human Services Research (CHSR) for the ARHN between December 5, 2012 and January 21, 2013. The purpose of the study was to provide feedback from community service providers in order to: 1) guide strategic planning, 2) highlight topics for increased public awareness, 3) identify areas for training, and 4) inform the statewide prevention agenda. In addition to Washington County, the seven other New York counties included in the region are Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, and Warren.

The 81 question survey was developed through a collaborative effort by a seven-member survey ARHN subcommittee during the Fall of 2012. The seven volunteer members are representatives of county public health departments and hospitals in the region that are involved in the ARHN. Subcommittee members identified the broad research questions to be addressed by the survey, drafted the individual survey questions, and developed the list of relevant health care stakeholders that received the survey. A more detailed description of the process is included in the full regional report.

The survey was administered electronically using a web-based survey program and distributed to an email contact list of 624. Ultimately, 285 surveys were completed during the six-week survey period, a response rate of 45.7 percent. Of all 285 responses, 56 indicated that Washington County was part of their service area; however, it should be noted that many of the responding health care stakeholders service multiple counties within the larger ARHN region.

### **Results**

**The following summarizes the major findings from the ARHN survey as applicable to Washington County. In most cases, the survey results for each of the eight individual counties do not differ in either a statistical or interpretive sense from the survey results for the overall region.**

- The top emerging are increases in obesity and related health issues, increases in substance abuse, and mental illness.
- The population groups identified most in need of targeted interventions are: the poor, children, individuals with mental health issues, the elderly, and substance abusers.
- Only about half of survey respondents reported being familiar with the NYS Department of Health Prevention Agenda priority areas.
- Among the five NYS Prevention Agenda priority areas, chronic disease was ranked as the area of highest community need and agency interest. The agenda area of HIV, STIs, and vaccine preventable diseases was ranked lowest in terms of overall interest and concern.
- The individual issues of greatest importance to survey respondents were the general health and safety of the physical environment, diabetes prevention, substance abuse, mental health screening and treatment, and the prevention of heart disease.
- Current involvement in efforts related to NYS Health Agenda issues is highest for prevention of chronic disease, promotion of a healthy and safe environment, and addressing the health of women, infants, and children.

- Respondents indicated the lowest level of current involvement with efforts to prevent HIV, STIs, and vaccine-preventable disease. Involvement in efforts to prevent substance abuse was also very low in Washington County and lower than in the rest of the region.
- When asked to rate the effectiveness of local efforts to address major health issues, most indicated that local efforts are only moderately effective. Additionally, a large portion of respondents indicated that they did not know, which suggests that additional information and publicity may be needed for health activities in the region.
- Education is a dominant strategy currently used to address major health issues in the region.
- Technology is not highly utilized by health service providers and their clients in the region. A slight majority of respondents agreed that technology enhancement should be a top priority for the region.
- The top future concern for stakeholders was funding. Regional health care organizations expressed concerns about reimbursement rates and expectations of reduced funding through government payments and other grants.

### Agenda Area Priority Ranking

One of the key aspects of the survey is how health care stakeholders rated the relative importance of each of the five NYS Health Agenda topics. Table 1 shows the priority areas, sorted by the portion selecting each as being the highest priority. It should be noted that the values reflect region-wide values, since the results of Washington County respondents were did not differ in a statistically significant manner from the rest of the group. Put simply, Washington County respondents agree with other respondents in the region that chronic disease is the most important agenda area.

<b>Table 1. Ranking of NYS Health Agenda issue areas</b>					
Percent selecting each priority by ranking					
	Most	2nd	3rd	4th	5th
Prevent chronic disease	39.7	19.2	13.2	16.7	10.9
Promote mental health; prevent substance abuse	22.5	23.1	24.5	26.4	3.5
Promote healthy, safe environment	22.1	22.7	21.4	17.1	16.7
Promote healthy women & children	11.5	31.5	34.2	16.7	6.6
Prevent HIV/STIs; promote vaccines	4.2	3.5	6.6	23.3	62.3

### Results of County-Specific Questions on Geographic Need and Targeting

The county-specific questions in the survey focus on the identification of individual sub-county geographic areas that are in need of targeted efforts to address either emerging health issues or health issues that are part of the five NYS agenda areas. On every issue one response was consistently the most popular: “Entire County.” As shown in Table 2, the portion of respondents that indicated the entire county of Washington (or some variant such as “all”) should be targeted was consistently high, with a range from 70.8 percent to 89.5 percent. The specific locations most frequently mentioned across all

issues were Fort Edward, Hudson Falls, and Whitehall; however, the portion of respondents that indicated there were areas in need of targeted efforts was low overall.

**Table 2. Percent of respondents identifying geographic target area by health issue**

	Issue						
	Emerging trend	Chronic disease	Healthy & safe environ.	Healthy women, children, infants	Promote mental health	Prevent substance abuse	HIV, STIs, vaccine prevent diseases
Entire county	82.1	85.7	70.8	79.2	84.6	87.0	89.5
Cambridge	2.6	0.0	0.0	0.0	0.0	0.0	0.0
Fort Ann	2.6	0.0	4.2	0.0	0.0	0.0	0.0
Fort Edward	7.7	3.6	12.5	4.2	3.8	4.3	5.3
Granville	2.6	0.0	0.0	0.0	0.0	0.0	0.0
Hampton	2.6	0.0	0.0	0.0	0.0	0.0	0.0
Hudson Falls	7.7	7.1	8.3	4.2	0.0	0.0	0.0
Kingsbury	5.1	3.6	8.3	4.2	7.7	8.7	5.3
Northern portion of co.	2.6	7.1	4.2	4.2	3.8	0.0	0.0
Putnam	2.6	0.0	0.0	0.0	0.0	0.0	0.0
Western portion of co.	0.0	0.0	0.0	0.0	0.0	0.0	0.0
White Creek	2.6	0.0	0.0	0.0	0.0	0.0	0.0
Whitehall	10.3	0.0	12.5	8.3	3.8	4.3	5.3

**Appendix 4:**  
**Community Health Needs Assessment Process – Data Consultants**

**Center for Health Workforce Studies, University at Albany School of Public Health**

Tracey Continelli, PhD, Graduate Research Assistant

Robert Martiniano, MPA, MPH, Research Associate

**Center for Human Services Research, University at Albany**

LuAnn McCormick, Ph.D., Senior Research Scientist

Bradley Watts, Ph.D., Senior Research Scientist

## Appendix 5:

### Adirondack Rural Health Network – Membership Affiliation, Steering Committee & Community Health Planning Committee

Name and Organization	Steering Committee	CHPC
Christina Akey, Health Educator, Fulton County Public Health		X
Pat Auer, RN, Director, Warren County Health Services	X	X
Linda Beers, Director, Essex County Public Health	X	X
Sue Cridland, RN, BSN, Director of Community Education, HealthLink Littauer		X
Jessica Darney-Buehler, CGS Public Health, Essex County Public Health		X
Josy Delaney, MS, CHES, Community Wellness Specialist, Alice Hyde Medical Center		X
Dan Durkee, Health Educator Warren County Health Services		X
Denise Frederick, Director, Fulton County Public Health	X	X
Peter Groff, Executive Director, Warren-Washington Association for Mental Health	X	
Katie Jock, Champlain Valley Physicians Hospital Medical Center		X
Chip Holmes, Chief Executive Officer, Inter-Lakes Health	X	X
Jane Hooper, Director of Community Relations, Elizabethtown Community Hospital		X
Travis Howe, Director, Mountain Lakes Regional EMS Council	X	
Patty Hunt, Director, Washington County Health Services	X	X
Lottie Jameson, Executive Director, Hudson Mohawk AHEC	X	X
Dot Jones, Director of Planning, Saratoga Hospital	X	X
Robert Kleppang, Director, Hamilton County Community Services	X	
Karen Levison, Director, Saratoga County Public Health	X	X
Ginger Carriero, VP of Medical Practices, Alice Hyde Medical Center		X
Cheryl McGratten, VP of Development, Nathan Littauer Hospital		X
Tracy Mills, Director, Research & Planning, Glens Falls Hospital		X
Megan Murphy, Grants & Strategic Projects Director, Adirondack Health		X
Sue Patterson, Public Health Educator, Franklin County Public Health		X
Jeri Reid, Director, Clinton County Health Department		X
John Rugge, MD, Chief Executive Officer, Hudson Headwaters Health Network	X	
Beth Ryan, Director, Hamilton County Public Health	X	X
Paul Scimeca, Vice President, Physician Practices and Community Health, Glens Falls Hospital		X
Trip Shannon, Chief Development Officer, Hudson Headwaters Health Network	X	



**Appendix 6:**  
**Community Health Planning Committee – Meeting Schedule and Attendance List**

<b>Participating Organization</b>	<b>Meeting Date</b>						
	<b>2/28/12</b>	<b>4/17/12</b>	<b>6/28/12</b>	<b>10/11/12</b>	<b>12/13/12</b>	<b>3/28/13</b>	<b>4/26/13</b>
Adirondack Health	✓	✓	✓	✓	✓	✓	✓
Alice Hyde Medical Center		✓	✓	✓	✓	✓	✓
CVPH Medical Center				✓			✓
Clinton County Health Department		✓	✓	✓		✓	✓
Elizabethtown Community Hospital			✓	✓	✓	✓	✓
Essex County Public Health	✓	✓	✓	✓	✓	✓	✓
Franklin County Public Health	✓	✓	✓		✓		✓
Fulton County Public Health	✓	✓		✓	✓	✓	✓
Glens Falls Hospital	✓	✓	✓	✓	✓	✓	✓
Hamilton County Public Health		✓				✓	
Hudson Headwaters Health Network				✓	✓	✓	
Hudson Mohawk AHEC	✓		✓		✓	✓	
Inter-Lakes Health	✓		✓	✓	✓	✓	✓
Nathan Littauer Hospital	✓	✓	✓	✓	✓	✓	✓
Saratoga County Public Health	✓	✓		✓	✓	✓	✓
Saratoga Hospital	✓	✓	✓	✓	✓	✓	✓
Tri-County United Way	✓	✓	✓				
Warren County Health Services	✓	✓	✓	✓	✓	✓	✓
Washington County Health Services	✓	✓	✓	✓	✓	✓	✓

**Appendix 7:**  
**ARHN Survey Response List**

<b>Name</b>	<b>Organization's Name</b>
William Holmes	Inter-Lakes Health
Ginny Cuttaia	Franklin County Public Health
Sylvia King Biondo	Planned Parenthood of the North Country New York
Gregory Freeman	CVPH Medical Center
Stella M Zanella	Fulmont Community Action Agency, Inc.
Jessica Lowry	CVPH Medical Center
Kelly Hartz	Nathan Littauer hospital
Mary Lee Ryan	Clinton County Health Dept. WIC Program
Bryan Amell	St. Joseph's Addiction Treatment and Recovery Centers
Carol M. Greco	St. Mary's Healthcare
Steven Serge	Fulton County YMCA
Duane Miller	St. Mary's Healthcare- Behavioral Health
Victor Giulianelli	St. Mary's Healthcare
Daniel Towne	Gloversville Housing Authority
Richard Flanger	Fulton County YMCA Residency
Michael L. Countryman	The Family Counseling Center
Julie Paquin	Franklin County Public Health Services
Irene Snyder	Harrietstown Housing Authority
Patrice McMahon	Nathan Littauer
Patricia McGillicuddy	Franklin County Public Health
Kelly Landrio	Fulton County YMCA
Margaret Luck	Nathan Littauer Hospital Lifeline Program
Laura O'Mara	Saratoga Hospital Nursing Home
Lynn Hart	Saranac Lake Middle School
Julie Demaree	Saratoga Hospital
Michelle Schumacher	YMCA
Deborah J. Ruggeri	Greater Johnstown School District
John M. Kanoza, PE, CPG	Clinton County Health Department
Tammy J Smith	Inter-Lakes Health
Susan Schrader	Association of Senior Citizens
Rick LeVitre	Cornell Cooperative Extension
Cheryl	Nathan Littauer
Barry Brogan	North Country Behavioral Healthcare Network
Maryann Barto	Clinton County Department of Health, Healthy Neighborhoods Program
Sharon Reynolds	PRIDE of Ticonderoga, Inc.
Jerie Reid	Clinton County
Deborah Byrd-Caudle	Parent to Parent of NYS
Julie Marshall	Alice Hyde Medical Center
Hans Lehr	Saratoga County Community Services Board / Mental Health Center
Karen Levison	Saratoga County Public Health Nursing Service
Lesley B. Lyon	Franklin County Dept. of Social Services
Christina Akey	Fulton County Public Health
Mary Rickard	Saratoga County Office for the Aging
Chattie Van Wert	Ticonderoga Revitalization Alliance
Maryalice Smith	Saranac Lake Central School
Anne Mason	Whitehall Family Medicine

<b>Name</b>	<b>Organization's Name</b>
Leisa Dwyer	Malone Central Schools
Penny Ruhm	Adirondack Rural Health Network
Dale Woods	Fulton County Public Health
Jackie Skiff	Joint Council for Economic Opportunity of Clinton and Franklin Counties, Inc.
Krista Berger	WIC
Margaret Cantwell	Franklin County Public Health Services
Julie Tromblee, RN	Elizabethtown Community Hospital
Mildred Ferriter	Community Health Center
Melinda Drake	St. Joseph's Addiction Treatment & Recovery Centers
Michael Vanyo	Gloversville Enlarged School District
William Viscardo	Adirondack Health
Kate Fowler	SMSA
Joe Keegan	North Country Community College
Megan Johnson	Warren-Washington Office of Community Services
John Aufdengarten	Alice Hyde Medical Center
Sue Malinowski	CAPTAIN Youth and Family Services
Misty Trim	Brushton-Moira Central School
Sarah Louer	Mountain Lake Services
Dan	Warren County Health Services
Amanda West	council for prevention of alcohol and substance abuse
Christie Sabo	Warren-Hamilton Counties Office for the Aging
Debra Pauquette	Granville Family Health/ Glens Falls Hospital
Cynthia Ford-Johnston	Keene Central School
Jennifer McDonald	Skidmore College
Vicky Wheaton-Saraceni	Adirondack Health Institute -- Adirondack Rural Health Network
Chrys Nestle	Cornell Cooperative Extension
William Larrow	Moriah Central School
Lisa Griffin	Franklin County DSS
Valerie Capone	Warren-Washington ARC
Denis Wilson	Fulmont Community Action Agency
Donna Beal	Mercy Care for the Adirondacks
Doug DiVello	Alice Hyde Medical Center
Judy Zyniecki	Center for Disability Services/Clover Patch early intervention services
Cathlyn Lamitie	Alice Hyde Medical Center
Joan Draus	Mental Health Association In Fulton & Montgomery Counties
Kelli Lyndaker	Washington County Public health
Jane Hooper	Elizabethtown Community Hospital
Sandra Geier	Gloversville enlarged School District
Janet L. Duprey	NYS Assembly
Miki L. Hopper	ACAP, Inc. EHS/HS
Tammy Kemp	Senior Citizens Council of Clinton County Inc.
Scott Osborne	Elizabethtown-Lewis Central School
Amanda Hewitt	Senior Citizen Service Center of Gloversville and Fulton County, Inc
TJ Feiden	Minerva Central School
Kim Crockett	Clinton County Youth Bureau
Trip Shannon	Hudson Headwaters Health Network
Brandy Richards	Hamilton County Community Services
Robin Nelson	Families First in Essex County
Deborah Ameden	Hamilton County Community Action Agency

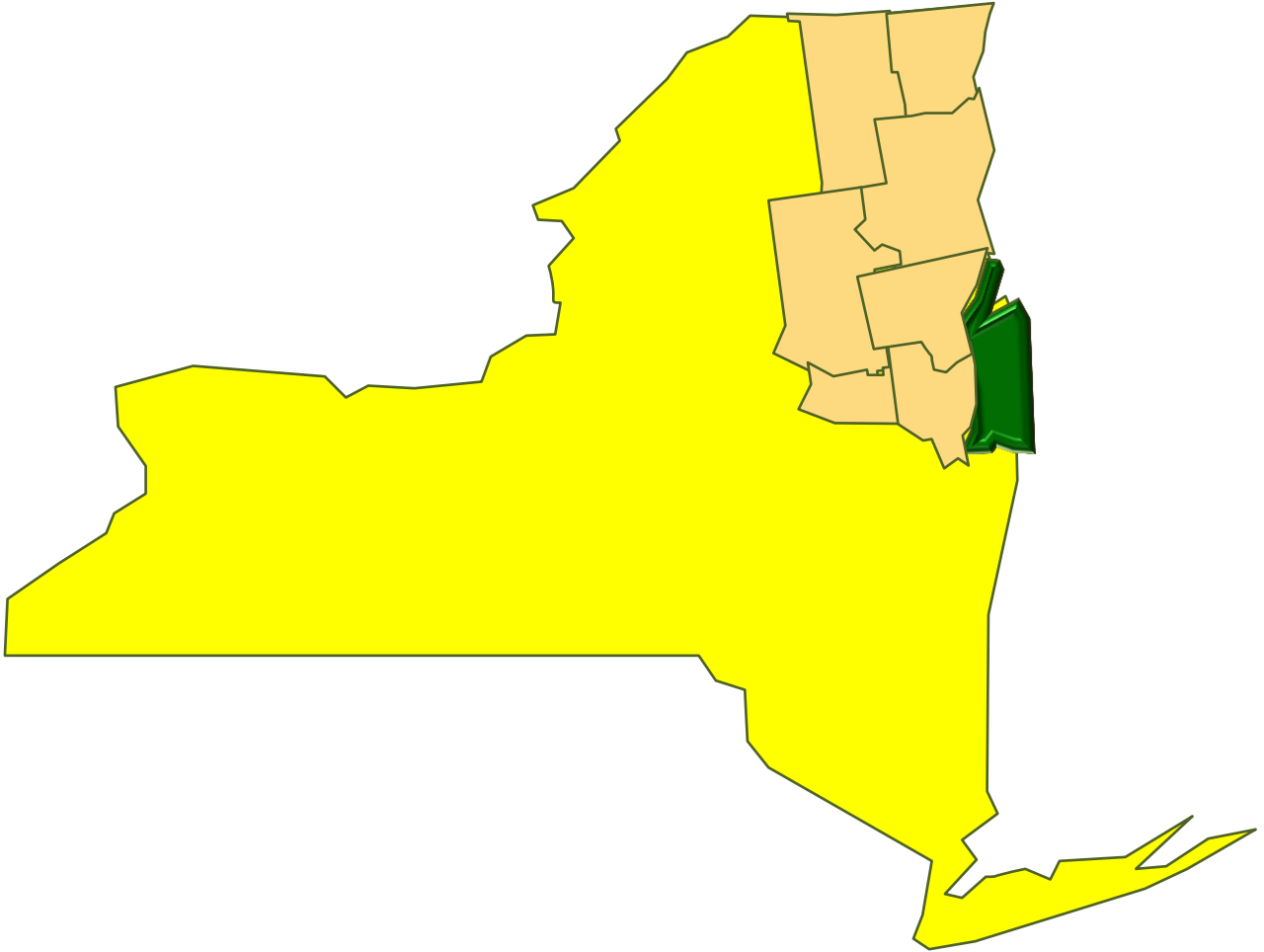
<b>Name</b>	<b>Organization's Name</b>
Betsy brown	PPNCNY Planned Parenthood
Theresa Intilli Klausner	Nathan Littauer Hospital
Penny	HCPHNS
Nancy Welch	Cornell Cooperative Extension, Hamilton County
Cathy Valenty	Saratoga County EOC - WIC
Norma Menard	Literacy Volunteers of Clinton County
Michael Piccirillo	Saratoga Springs City School District
Peter Whitten	Shelters of Saratoga, Inc
Keith R. Matott	The Development Corporation
Melissa Engwer	Warren Washington Hamilton County Cancer Services Program at Glens Falls Hospital
Theresa Cole	Akwesasne Housing Authority
Janine Dykeman	Mental Health Association in Fulton and Montgomery Counties
Margot Gold	North Country Healthy Heart Network, Inc.
Cynthia Summo	Keene Central School
Pam Merrick	Malone middle school
Jamie Basiliere	Child Care Coordinating Council of the North Country, Inc.
Michele Armani	North Country Workforce Investment Board
Lia Mcfarline	Inter-Lakes Health
Sue Cridland	Nathan Littauer Hospital – Health Link
Cathleen Kerman	Glens Falls Hospital
Brian Bearor	Family YMCA of the Glens Falls Area
Linda Scagel	Community Health Center of the North Country
Priscilla Wheeler	Saratoga County Public Health
Megan Murphy	Adirondack Health
Sue Frasier	Mountain Valley Hospice
Deborah Skivington	The Family Counseling Center
Sue Ann Caron	Essex County Department of Social Services
Leslie Beadle	Nathan Littauer Hospital Nursing Home
Jean Wiseman	Capital District Child Care Council
Susan Patterson	Franklin Co. Public Health
Kathy Varney	Glens Falls Hospital
Kelly Owens	HM AHEC
Crystal Carter	Clinton County Office for the Aging
Stephanie Seymour	Saratoga Hospital
Jamie Konkoski	North Country Healthy Heart Network
Patty Hunt	Washington County Public Health Nursing Service
Bonnie Sue Newell	Mental Health Association of Clinton and Franklin Counties
Beth Lawyer	Citizen Advocates, Inc., North Star Behavioral Health Services
Suzanne M. Goolden	Franklin County
Roseann Doran	Cornell Cooperative Extension in Fulton & Montg. Co.
Katie Strack	Franklin County Public Health Services
Ginelle Jones	Warren County Health Services
Ann Rhodes	HFM Prevention Council
Patricia Gero	Adirondack Health
Chandler M. Ralph	Adirondack Health
Kim McElwain	Saint Regis Mohawk Tribe
Gerald Goldman	Saranac Lake CSD
Elizabeth Zicari	HCR Home Care
Bonnie Yopp ANP	Community Link

<b>Name</b>	<b>Organization's Name</b>
Stacey Beebie	Clinton County MH and AS
Vicki Driscoll	Clinton County Health Department
L. Jameson	HM AHEC
Beth Ryan	Hamilton County Public Health Nursing Service
Rebecca Carman	Shenendehowa Central School District
Lisa Harrington	Wait House
Genevieve Boyd	Long Lake Central School
Tracy Mills	Glens Falls Hospital
Robert York	Office of Community Services for Warren and Washington Counties
Shelley Shutler	Mental Health Assoc. of Clinton & Franklin Counties
Dot Jones	Saratoga Hospital
Maria Burke	Literacy Volunteers of Essex/Franklin Counties
Gina Cantanucci-Mitchell	Washington County ADRC
Ernest J. Gagnon	Fulton County Mental Health
S. Cooper	Fulton County Department of Social Services
Pam Dray	Saratoga County EOC Head Start
Patricia Auer	Warren County Health Services
Laurence Kelly	Nathan Littauer Hospital
Susan Dufel	NYS Department of Labor
Sharon Schaldone	Warren County Health Services
Kristen Sayers	NYSDOH
Tari Botto	Franklin County Department of Social Services
Carol Underwood	Center for Lung and Chest Surgery
Sheri Sauve	Plattsburgh One Worksource/NYSDOL Manager
Susan M. Wilson-Sott	Office for the Aging in Franklin Co.
Laurie Williams	Clinton County Health Department
Jessica Darney Buehler	Essex County Public Health
Sharon Luckenbaugh	Glens Falls Hospital
Peter Groff	Warren Washington Association for Mental Health
James Seeley	Cornell Cooperative Extension
Josh Wilson	North Country Healthy Heart Network, Inc.
Rachel Truckenmiller	ASAPP's Promise
Diane Whitten	Cornell Cooperative Extension Saratoga County
Justin Hladik	Reality Check of Hamilton, Fulton, and Montgomery Counties
Steve Peters	City of Plattsburgh
Sheila Kapper	Elizabethtown-Lewis Central School
Greg Truckenmiller	Fulton-Montgomery Community College
Stuart G. Baker	Town of Queensbury
Sarah Kraemer	Catholic Charities of Fulton & Montgomery Counties
John Nasso	Catholic Charities of Fulton and Montgomery Counties
L. Daniel Jacobs	St. Regis Mohawk Health Services A/CDP Outpatient
Darlene Spinner	Literacy Volunteers of Essex/Franklin Counties
Pam LeFebvre	Clinton County Health Department
Sarina Nicola	Essex County Public Health Nursing Services
Lythia Vera	Eastern Adirondack Health Care Network
Martin Nephew	Mountain Lake Services
Barbara DeLuca	Nathan Littauer Hospital
Cecily Damm	Saranac Lake High School
Tracey	Planned Parenthood Mohawk Hudson

<b>Name</b>	<b>Organization's Name</b>
Patricia Godreau Sexton	St. Regis Falls Central School
Deborah Roddy	The Adirondack Arc
John Sawyer	Hudson Headwaters Health Network
Nichole Louis	HCR Home Care
Stephen Pavone	Gloversville School District
Jackie Mulcahy	Queensbury union free school district
Anita Deming	Cornell Cooperative Extension - Essex County
Frederick Goldberg, MD	Nathan Littauer Hospital
David A Alloy	Glens Falls Hospital
Annie McKinley	Essex County Mental Health
Bonnie Black	BHSN
Eric Day	Clinton County Office of Emergency Services
Douglas Huntley	Queensbury Union Free School District
Rebecca Evansky	STARS
James Dexter	Washington-Saratoga-Warren-Hamilton-Essex BOCES
Steven Bowman	Clinton County Veterans Service Agency
Susan Kelley	STOP Domestic Violence/BHSN
Marjorie Irwin	Washington County WIC
Robert E. Shay	Town of White Creek
Vanetta Conn	Cornell Cooperative Extension Franklin County
Patty Bashaw	Essex County Office for the Aging
Cheryl L. Brown	Oppenheim-Ephratah Central School District
Wes Carr	Saratoga County Youth Bureau
Marjorie Tierney	Ticonderoga central school
Barbara Sweet	Tri County United Way
Kari Cushing	Franklin Community Center
Paul Berry	Hadley-Luzerne CSD
Brian Post	Upward Bound
Erin Krivitski	Glens Falls Hospital
Lorraine Kourofsky	Chateauguay Central School
Susan Delehanty	Citizen Advocates, Inc.
Linda L. Beers	Essex County Public Health
Dr Stan Maziejka	Stillwater CSD
Dawn Tucker	Fort Edward Internal Medicine
Margaret Sing Smith	Warren County Youth Bureau
KEITH TYO	SUNY PLATTSBURGH
Antoinette P Roth	Warren County WIC
Cathie Werly	FRANKLIN COUNTY PUBLIC HEALTH SERVICES
Dale Breault Jr.	Chateauguay Central School
Linda Ferrara	Adirondack Cardiology - A Service of Glens Falls Hospital
Julie Wright	Glens Falls Hospital
Lori Thompson	St Regis Mohawk Health Services
Robert Kleppang	Hamilton County Community Services
Cora Clark	Lake Placid Middle High School
Amy Brender	HHHN-Ryan White Part C Program
Donna DiPietro	Bolton Central School
Chris Hunsinger	Warren County Employment & Training
Barbara Vickery	Capital District Child Care Coordinating Council
Paul Williamsen	Mayfield Central School District

<b>Name</b>	<b>Organization's Name</b>
Andrew Cruikshank	Fort Hudson Health System
Sandra McNeil	Glens Falls Hospital
Garry Douglas	North Country Chamber of Commerce
Steve Valley	Essex County Mental Health Services
Timothy Farrell	Minerva Central School
Patrick Dee	Lake George Central Schools
Kimberly Mulverhill	Malone Central School District
Elizabeth St John	Washington County Public Health
Valerie Muratori	Saratoga Bridges NYSARC , Inc. Saratoga Chapter
Denise Benton	Catholic Charities of Fulton and Montgomery Counties
Melissa Chinigo	Glens Falls Hospital
Vanessa Ross	Washington County CARES
Claire Murphy	Washington County Economic Opportunity Council, Inc.
Dustin Swanger	Fulton-Montgomery Community College
Janice Fitzgerald	Parent to Parent of NYS
Cheryl A Murphy	American Red Cross
Andrea Fettingier	Fulton County Office for Aging
Donn Diefenbacher	Mountain Valley Hospice
Jodi Gibbs	Inter-Lakes Health
Cynthia Trudeau	Inter-Lakes Health
John Redden	Clinton County Social Services
Ellen Gordon	ACAP/OneWorkSource
michele	Malone central school
Heidi	NCHHN
Wayne C. Walbridge	Malone Central School District
Heidi Parisi	Nathan Littauer Hospital
Susan Menke	Wells Central School
Susan Sherman	Gloversville High School
Jane havens	Community, Work and Independence,, Inc.
Stephanie LaPlant	St. Joseph's Community School
MARY DICKERSON	LONG LAKE CENTRAL SCHOOL
Fred Wilson	Hudson Headwaters Health Network
Richelle Beach	Clinton County Child Advocacy Center
Marie Capezzuti	Washington County Public Health
Scott Harding	Church of the Messiah
Suzanne Hagadorn	Cancer Services Program of Fulton & Montgomery Counties
Deborah Battiste	Town of Kingsbury Recreation
Kari Scott	Willsboro Central School
Denise C. Frederick	Fulton County Public Health
Clark Hults	Newcomb Central School District
Lorine Heroth	Gloversville Middle School

**Appendix 8:**  
**Adirondack Rural Health Network Regional Map**





## **Appendix 9:**

### **Summary of Findings: Washington County**

#### **Washington County**

##### Summary of Findings

Prepared by Center of Health Workforce Studies- June 2013

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#### Demographics:

Washington County's population is just over 63,000, making it the fourth most populous county in the Adirondack Rural Health Network (ARHN) region and the 41<sup>st</sup> most populous in the state. The population is neither racially nor ethnically diverse; over 93% of the population is White, Non-Hispanic, 2.8% is Black/African American, Non-Hispanic, and 2.3% is Hispanic/Latino. More than 15% of the population in Washington County is 65 years of age and older, slightly higher than in the ARHN region (14.6%) and Upstate New York (14.3%).

Mean household income in the County is \$59,259 and per capita income is \$23,252, both lower than the state-wide figures of \$82,699 and \$31,796 respectively.<sup>20</sup> A higher percentage of individuals in Washington County live below the Federal Poverty Level (11.9%) than in the ARHN region or Upstate New York as a whole (both 10.9%). The percentage of individuals receiving Medicaid in Washington County (18.1%) is also higher than the ARHN region (15.9%) and Upstate New York (16.3%).

The highest level of education completed by 56% of the population ages 25 and older is a high school diploma or GED, and an additional 27% have an Associate's, Bachelor's, or Graduate/Professional degree. More than 62% of the population ages 16 and older is in the workforce. In 2011, Washington County had an unemployment rate of 7.6%, lower than the rates in both the ARHN region (8.1%) and Upstate New York (7.7%).

The largest employment sector in Washington County is manufacturing (15.8%), followed by health care and social assistance (14.7%), retail trade (13.8%), and construction (10.0%).

#### Health System Profile

Washington County does not have a hospital; it does have 4 nursing homes and 3 adult care facilities with a total of 528 and 102 beds respectively. There are nearly 37 full time equivalent (FTE) primary care physicians practicing in Washington County, or 57.7 per 100,000 population, which is substantially lower than the rates in both the ARHN region (99.9) and Upstate New York (108.5). There are 664 registered nurses, 459 licensed practical nurses, and 35 physicians licensed in the County. Washington County includes one primary care health professional shortage area designation.

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<sup>20</sup> Mean household income was determined by averaging the yearly income as reported by the American Community Survey, 2007-2011.

## Educational Profile

There are eleven (11) school districts in Washington County, with a total enrollment of nearly 9,300. Slightly more than 29% of the enrolled students receive free or reduced lunches, and the high school dropout rate is 1.6%; both numbers are comparable to their respective rates in the ARHN region (29.3% free and reduced lunch and 1.7% dropout rate) and Upstate New York (31.6% free and reduced lunch and 1.7% dropout rate). There are 10.9 students per teacher, lower than the ARHN regional rate of 11.6 and the Upstate New York rate of 12.2. There are two LPN education programs in Washington County.

## Health Disparities:

Washington County does not have significant health disparities. The percentage of adults<sup>21</sup> with a regular health care provider (81.8%) was lower than both the ARHN region (86.6%) and the Prevention Agenda benchmark of 90.8%. The rate of age-adjusted adults with avoidable hospitalizations<sup>22</sup> (139.1) per 100,000 population was lower than the ARHN region (147.3) but slightly higher than the Prevention Agenda benchmark of 133.3.

## Healthy and Safe Environment:

Occupational injuries are a challenge for Washington County. The following rates were all above their respective Upstate New York rates:

- malignant mesothelioma cases per 100,000, ages 15 and above;
- pneumoconiosis hospitalizations per 10,000, ages 15 above;
- asbestosis hospitalizations per 10,000, ages 15 and above; and
- work-related hospitalizations per 10,000, ages 16 and above.

The rate of ED visits for occupational injuries for working adolescents ages 15 to 19 per 10,000 population was lower (51.1) than both the ARHN region (56.1) and Upstate New York (51.8) rates but higher than the Prevention Agenda benchmark of 33.0. Additionally, the rate of elevated blood lead levels for those employed per 10,000 population ages 16 and above was higher than both the ARHN and Upstate New York rates.

## Chronic Disease:

Obesity and smoking rates are high in Washington County. Nearly 30% of adults are obese, substantially higher than the Prevention Agenda benchmark of 23%. Additionally, slightly more than one in five public school children are obese, also higher than the Prevention Agenda benchmark of 16.7%. Nearly 30% of age-adjusted adults have ever been diagnosed with high blood pressure, higher than the New York State rate of approximately 26%. Rates of diabetes deaths per 1000,000 population were significantly higher in the County (27.5) compared to rates in the ARHN region (17.8) and Upstate New York (17.7).

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<sup>21</sup> Unless otherwise specified, adult is defined as age 18 and older.

<sup>22</sup> Hospitalizations for such things as asthma, diabetes, otitis media, etc. that occurred as a result of inadequate access to primary care services.

Nearly 24% of adult Washington County residents smoke, placing smoking higher than the percentages in the ARHN region (21.4%) or Upstate New York (18.5%), and significantly higher than the Prevention Agenda benchmark of 15.0%. Overall asthma hospitalizations per 10,000 population and for individual age groups in Washington County were all higher than their respective ARHN and Upstate New York rates. The rates of lung and bronchus deaths and cases, as well as the rates of lower chronic respiratory disease deaths and cases, were higher than their respective ARHN region and Upstate New York rates per 100,000 population.

#### Women, Infants, and Children:

The rates of birth per 1,000 females to teenagers ages 15 to 17 and 18 to 19 in Washington County were higher than those in the ARHN region or Upstate New York, particularly births to women ages 18 and 19 (67.8 per 1,000 females in the County compared to 35.4 in Upstate New York). Pregnant women receiving WIC had higher rates of pre-pregnancy obesity, gestational weight gain greater than the ideal, gestational diabetes, and gestational hypertension than comparable populations in New York.

The percentages of children screened for lead by age 9 months, by age 18 months, and with two screenings by age 36 months were lower in Washington County than their respective Upstate New York percentages. Additionally, the rate of children younger than 6 with confirmed blood lead levels greater than or equal to 10 mg/dl per 1,000 children tested was higher than both the ARHN and Upstate New York rates.

#### HIV/STDs, Vaccine-Preventable Disease, and Health Care-Associated Infections:

The percentage of children ages 19 to 35 months with the appropriate immunization series<sup>23</sup> in the County (58.3%) was lower than the Prevention Agenda benchmark of 80%. Additionally, the percentage of females ages 13 to 17 with the 3 dose HPV vaccine (34.2%) was also lower than the Prevention Agenda benchmark of 50%.

#### Substance Abuse and Behavioral Health

The rates of age-adjusted suicides per 100,000 population (13.0) and of self-inflicted hospitalizations per 10,000 population (11.8) in Washington County were significantly higher than their respective rates in the ARHN region (10.0, 9.1 respectively) or in Upstate New York (8.0, 6.1 respectively). Additionally, the rate of self-inflicted hospitalizations for ages 15 to 19 per 10,000 population (30.2) was more than double the Upstate New York rate (11.0) and nearly 50% higher than the ARHN rate (20.3).

The rates of alcohol-related accidents and injuries and deaths per 100,000 population were worse than their respective Upstate New York rates. The rate of children served in mental health outpatient settings per 100,000 population for ages 8 and under and for ages 9 to 17 were substantially higher than their respective ARHN region and Upstate New York rates.

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<sup>23</sup> The number of children (ages 19-35 months) per 100 population who received their 4:3:1:3:3:1:4 immunization series (4 DTaP, 3 polio, 1 MMR, 3 hep B, 3 Hib, 1 varicella, 4 PCV13).

## **Appendix 10:**

### **Washington County Health Needs Prioritization Process**

Using county specific data received from the Adirondack Rural Health Network (ARHN) survey conducted December 2012 and January 2013, Washington County Public Health hosted two community engagement meetings to assess the health status of Washington County, determine 8 areas of most concern, and to develop action plans for 2 priority areas with 3 focus areas within the 2013-2017 New York State Prevention Agenda. Public Health invited community stakeholders from numerous sectors within the county. The 14 of 62 in attendance represented Glens Falls Hospital, Cornell Cooperative Extension, Public Health, Tobacco Prevention, The ADRC/OFA, Sexual Trauma and Recovery Services, WIC, Council for Prevention, DSS, and the Adirondack Rural Health Network. Those invited, but missing at the table represented schools, government, and healthcare providers in Washington County.

The first of the two-community engagement meetings titled, “The Health of Washington County,” was held on July 17, 2013 at the Annex II building in Fort Edward from 10am-12pm. The purpose of this meeting was to educate community stakeholders on the current health of Washington County. This was accomplished by creating and presenting a power point presentation around the Adirondack rural Health Networks (ARHN) and Center for Human Services Research survey results. Additional resources were referred to and included regional survey results, Prevention Agenda website data, BRFSS Data, and the Council for Preventions Youth Survey results. At the end of the meeting, those in attendance were given instruction to continue reviewing county specific data using links that the facilitator would attach via email. The links would provide additional information for the attendees to prioritize 8 areas of concern that will be used in the next meetings process.

The second community engagement meeting titled, “Let’s Prioritize,” was held on July 24, 2013 at the Annex II building in Fort Edward from 10-1pm. The purpose of this meeting was to select eight health areas of concern in Washington County and discuss them using specific questions. The eight health areas were: Chronic Disease, Obesity, Mental Illness and Substance Abuse, Tobacco, Maternal Child Health, Access to Care, STD’s and HIV, and Healthy Safe Environments. Each area was subject to answering the following questions to promote discussion:

- I. Severity of the Issue
  - a. Percent of population affected
  - b. Is this an emerging issue?
- II. What does the community say?
  - a. Will buy in be easy or hard?
- III. Is funding available?
- IV. What is in place now and is it working?
  - a. If so, who is doing the work?
  - b. If not, who will do the work?
- V. Benefits if Priority?

- a. Quality of life
- b. Impact health indicators
- c. Long or short term benefit

As discussion ended, the Dot Method of Prioritization process was implemented to prioritize the top three focus areas. Each community stakeholder was given a strip of dots and was asked to place dots on the focus area of most importance. The result of this process determined the top three health priority areas, made way for action plans to be developed, and will assist in moving New York closer to becoming the healthiest state.

Based on analysis of the available health data, community surveys, input from stakeholders and discussions at the regional and local levels, listed below are the 2 priority areas and 3 focus areas that will be addressed for the next 3 years in Washington County:

- **Chronic Disease:** Reducing Obesity in Children and Adults
- **Chronic Disease:** Reduce Illness, Disability, Diagnosis, and Deaths Associated with Tobacco and Second Hand Smoke Exposure
- **Promote Mental Health and Prevent Substance Abuse:** Prevent Substance Abuse and Mental Emotional Behaviors

<h3>Dot Method Prioritization Process</h3> <p>1</p>	<h3>Dot Method Overview</h3> <ul style="list-style-type: none"> <li>• Eight selected criteria used to discuss the focus area/issue.</li> <li>• Each member is given a set of dots for voting.             <ul style="list-style-type: none"> <li>• The number of dots can vary.</li> <li>• Research suggests 1/3 of the number of area assessed, i.e., each participant gets 6 dots if 18 areas are being assessed.</li> </ul> </li> <li>• Facilitator gives participants an overview of each of the focus area(s) and asks participants to discuss all of the relevant issues.</li> <li>• At the end of the discussion, participants place one or more dots corresponding to the focus area(s)/issue(s) to show their strong preferences for that focus area(s)/issue(s) as a priority.</li> <li>• Areas(s) with the most dots is/are the top priority (ies).</li> <li>• You may wish to conduct this voting in several rounds to quickly eliminate those focus areas/issues where there is no interest to identify as a priority.</li> </ul> <p>16</p>	<h3>Dot Method Criteria for Discussion</h3> <ul style="list-style-type: none"> <li>• How severe is the focus area/issue?             <ul style="list-style-type: none"> <li>• In considering the data, are there many individuals affected by the focus area/issue?</li> <li>• Is this an emerging focus area/issue?</li> </ul> </li> <li>• Does the community view this focus areas/issue as an area which needs to be addressed?</li> <li>• What is the perceived need for more interventions or programs to address the focus area/issue. Does the community have enough problems currently to address the focus area/issue?</li> <li>• Is funding for the intervention available and sustainable to address the focus area/issue?             <ul style="list-style-type: none"> <li>• Property tax dollars</li> <li>• Reimbursement – government or billable services</li> <li>• Grants</li> </ul> </li> </ul> <p>17</p>
<h3>Dot Method Criteria for Discussion</h3> <ul style="list-style-type: none"> <li>• Are evidence based interventions available for implementation? Consider sources:             <ul style="list-style-type: none"> <li>• New York State Department of Health prevention agenda proposed interventions, and</li> <li>• other evidence-based interventions listed in literature or research.</li> </ul> </li> <li>• What is the effectiveness of current strategies to address the focus area? Consider:             <ul style="list-style-type: none"> <li>• the ability of the current strategies to reach the target audience, and</li> <li>• the ability of the current strategies to achieve the desired results.</li> </ul> </li> </ul> <p>18</p>	<h3>Dot Method Criteria for Discussion</h3> <ul style="list-style-type: none"> <li>• What is the effectiveness of current strategies to address the focus area? Consider:             <ul style="list-style-type: none"> <li>• the ability of the current strategies to reach the target audience, and</li> <li>• the ability of the current strategies to achieve the desired results.</li> </ul> </li> <li>• Are there multiple health benefits from making this a priority? Consider:             <ul style="list-style-type: none"> <li>• how the focus area or issue affects overall quality of life,</li> <li>• the impact on other health indicators, and</li> <li>• whether the focus area has long-term impact on health status for the individuals affected.</li> </ul> </li> </ul> <p>19</p>	<h3>How the Dot Method Process Will Work</h3> <ul style="list-style-type: none"> <li>• Establish a meeting structure (either before or at the beginning of the meeting)             <ul style="list-style-type: none"> <li>• Determine who will facilitate the meeting</li> <li>• Determine if you want to prioritize a limited number of focus areas                 <ul style="list-style-type: none"> <li>• Identify the focus areas which will not be discussed through an initial round of voting or through consensus</li> </ul> </li> <li>• Establish discussion time limits for each focus area and for each criterion</li> </ul> </li> <li>• Determine what material(s) will be needed for the process             <ul style="list-style-type: none"> <li>• Data</li> <li>• Dots</li> <li>• Newsprint with the focus areas written on them so participants can vote by placing their dots</li> </ul> </li> <li>• Conduct the discussion and then vote</li> </ul> <p>20</p>

**Appendix 11:**  
**Washington County Health Needs Prioritization Process- Meeting Schedule and Attendance List**

<b>Participating Organizations</b>	<b>09/25/2013</b>	<b>10/07/2013</b>
Adirondack Rural Health Network	√	
AIDS Council of Northeastern New York		
Argyle Central School District		
Argyle Town Clerk		
American Foundation of Suicide Prevention		
Cambridge Central School District		
Council For Prevention, INC	√	√
Cornell Cooperative Extension, Washington County	√	√
Fort Ann Central School District		
Fort Edward Central School District		
Glens Falls Hospital Behavioral Health Services		
Glens Falls Hospital Cancer Services Program	√	
Glens Falls Hospital Family Health Centers		
Glens Falls Hospital Health Promotions Center	√	√
Granville Central School District		
Greenwich Central School District		
Hartford Central School District		
Hudson Falls Central School District	√	√
Hudson Headwaters/Ryan White Program		
Southern Adirondack Tobacco Free Coalition	√	√
Warren/Washington Homeless Youth Coalition		
Warren/Washington County Association for Mental Health		
Washington County ADRC/OFA	√	
Washington County Board of Supervisors and Chairman		
Washington County DSS		
Washington County Public Health	√	√
Washington County Head Start		
Washington County Health Committee and Chairman		
Washington County Safety Officer		
Washington County Sexual Trauma and Recovery Services	√	√
Washington County Sheriff Department		
Washington County Veterans		
Washington County WIC	√	√
Washington County Youth Bureau		
Whitehall Central School District		
WSWHE BOCES		

## Appendix: 12

### ARHN Summary of Demographics

Adirondack Rural Health Network Summary of Demographic Information, Page 1 of 2	County Washington	ARHN Region	Upstate NYS	New York State
<b>Square Miles</b>				
Total Square Miles	831	9,182	46,824	47,126
Total Square Miles for Farms	317	1,018	11,210	11,210
Percent of Total Square Miles Farms	38.1%	11.1%	23.9%	23.8%
Population per Square Mile	76.0	63.3	238.6	409.6
<b>Population</b>				
Total Population	63,174	581,120	11,173,468	19,302,448
Percent White, Non-Hispanic	93.3%	92.0%	77.0%	58.7%
Percent Black, Non-Hispanic	2.8%	2.4%	8.2%	14.5%
Percent Hispanic/Latino	2.3%	2.4%	9.4%	17.4%
Percent Asian/Pacific Islander, Non-Hispanic	0.5%	1.1%	3.4%	7.3%
Percent Alaskan Native/American Indian	0.1%	0.7%	0.3%	0.2%
Percent Multi-race/Other	0.9%	1.5%	1.7%	1.9%
Number Ages 0 - 4	3,268	30,359	636,529	1,158,007
Number Ages 5 - 17	10,045	94,311	1,935,757	3,189,602
Number Ages 18 - 64	40,219	371,862	6,994,924	12,363,940
Number Ages 65 Plus	9,642	84,588	1,606,258	2,590,899
Number Ages 15 - 44 Female	10,889	106,102	2,150,703	4,052,491
<b>Family Status</b>				
Number of Households	24,682	232,612	4,165,709	7,215,687
Percent Families Single Parent Households	8.3%	8.4%	8.7%	9.9%
Percent Households with Grandparents as Parents	3.6%	2.7%	3.2%	4.0%
<b>Poverty</b>				
Percent of Individuals Under Federal Poverty Level	11.9%	10.9%	10.9%	14.5%
Percent of Individuals Receiving Medicaid	18.1%	15.9%	16.3%	25.4%
Per Capita Medicaid Expenditures	\$1,442.25	\$1,358.05	\$1,472.99	\$2,306.06
<b>Immigrant Status</b>				
Percent Born in American Territories	0.2%	0.3%	0.8%	1.7%
Percent Born in Other Countries	2.2%	3.8%	11.0%	21.8%
Percent Speak a Language Other Than English at Home	4.2%	5.7%	15.7%	29.5%
<b>Housing</b>				
Total Housing Units	28,758	288,931	4,724,311	8,081,303

<b>Percent Housing Units Occupied</b>	85.8%	80.5%	88.2%	89.3%
<b>Percent Housing Units Owner Occupied</b>	74.2%	72.2%	71.1%	54.8%
<b>Percent Housing Units Renter Occupied</b>	25.8%	27.8%	28.9%	45.2%
<b>Percent Build Before 1970</b>	57.6%	50.9%	64.1%	70.5%
<b>Percent Built Between 1970 and 1979</b>	11.1%	13.6%	12.2%	10.1%
<b>Percent Built Between 1980 and 1989</b>	11.6%	13.7%	9.6%	7.5%
<b>Percent Built Between 1990 and 1999</b>	11.1%	11.9%	7.9%	6.1%
<b>Percent Build 2000 and Later</b>	8.6%	9.8%	6.2%	5.8%
<b>Availability of Vehicles</b>				
<b>Percent with No Vehicles Available</b>	6.9%	7.1%	9.6%	28.8%
<b>Percent with One Vehicle Available</b>	31.6%	33.7%	33.2%	32.4%
<b>Percent with Two Vehicles Available</b>	39.9%	41.6%	39.1%	27.1%
<b>Percent with Three or More Vehicles Available</b>	21.6%	17.5%	18.1%	11.7%
<b>Adirondack Rural Health Network Summary of Demographic Information, Page 2 of 2</b>	<b>County Washington</b>	<b>ARHN Region</b>	<b>Upstate NYS</b>	<b>New York State</b>
<b>Education</b>				
<b>Total Population Ages 25 and Older</b>	44,486	404,943	7,493,593	12,999,473
<b>Percent with Less than High School Education/GED</b>	13.7%	11.6%	11.4%	15.4%
<b>Percent High School Graduate/GED</b>	42.1%	33.9%	29.7%	27.8%
<b>Percent Some College, No Degree</b>	17.5%	17.5%	17.4%	16.1%
<b>Percent Associate Degree</b>	9.8%	10.8%	9.8%	8.2%
<b>Percent Bachelor's Degree</b>	9.5%	14.9%	17.5%	18.5%
<b>Percent Graduate or Professional Degree</b>	7.4%	11.2%	14.2%	14.0%
<b>Employment Status</b>				
<b>Total Population Ages 16 and Older</b>	51,700	472,779	8,930,148	15,494,360
<b>Total Population Ages 16 and Older in Armed Forces</b>	43	1,431	22,511	26,568
<b>Total Population Ages 16 and Older in Civilian Workforce</b>	31,916	295,547	5,704,966	9,855,104
<b>Percent Unemployed</b>	8.5%	6.8%	7.2%	8.1%
<b>Employment Sector</b>				
<b>Total Employed</b>	28,640	269,590	5,225,891	8,948,589
<b>Percent in Agriculture, Forestry, Fishing, Hunting, and Mining</b>	3.4%	1.7%	0.9%	0.6%
<b>Percent in Construction</b>	10.0%	7.2%	6.2%	5.7%
<b>Percent in Manufacturing</b>	15.8%	9.8%	8.7%	6.8%
<b>Percent in Wholesale Trade</b>	2.5%	2.2%	2.7%	2.6%
<b>Percent in Retail Trade</b>	13.8%	12.4%	11.5%	10.8%



<b>Percent in Transportation</b>	4.0%	3.9%	4.6%	5.1%
<b>Percent in Information Services</b>	1.5%	1.8%	2.3%	2.9%
<b>Percent in Finance</b>	4.7%	5.8%	7.0%	8.3%
<b>Percent in Other Professional Occupations</b>	4.3%	7.4%	9.9%	10.9%
<b>Percent in Education</b>	8.8%	11.4%	12.5%	11.0%
<b>Percent in Health Care and Social Assistance</b>	14.7%	15.8%	15.8%	16.4%
<b>Percent in Arts and Entertainment</b>	7.6%	9.0%	7.8%	8.8%
<b>Percent in Other Services</b>	3.1%	4.4%	4.7%	5.2%
<b>Percent in Public Administration</b>	5.9%	7.2%	5.5%	4.9%

Sources:

Employment Sector: American Community Survey, 2009 - 2011  
Medicaid Data: New York State Department of Health, 2011  
All Other Data: American Community Survey, 2007 - 2011

# Appendix: 13

## ARHN Community Assessment Health Systems Profile

Date Revised: 5/20/2013

### ARHN COMMUNITY ASSESSMENT HEALTH SYSTEM PROFILE

Adirondack Rural Health Network		County										ARIN Region	
Page 1 of 3	Population, July 1, 2011	Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington	(1)	Update NYS (2)	New York State
Total Hospital Beds		81,945	39,181	51,551	55,180	4,793	49,919	220,882	65,831	63,165	582,528	11,220,287	19,465,197
Hospital Beds per 100,000 Population		333	32	171	74	0	130	171	410	0	1,191	30,997	56,341
Medical/Surgical Beds		406.4	81.7	331.7	134.1	0.0	260.4	77.4	622.8	0.0	204.5	276.3	289.4
Intensive Care Beds		227	2	129	47	0	70	115	300	0	820	19,112	33,564
Coronary Care Beds		14	0	14	8	0	5	7	12	0	55	1,652	2,897
Pediatric Beds		7	0	0	0	0	3	7	12	0	26	766	1,175
Maternity Beds		10	0	3	12	0	0	12	16	0	53	1,197	2,355
Physical Therapy and Rehabilitation Beds		21	0	13	7	0	8	14	23	0	78	1,899	3,330
Psychiatric Beds		34	0	0	0	0	10	0	15	0	15	1,202	2,170
Other Beds		20	30	12	0	0	20	16	32	0	94	2,589	5,606
Hospital Beds per Facility		20	30	0	0	0	14	0	0	0	50	2,600	5,244
Adirondack Medical Center-Lake Placid Site		0	2	0	0	0	0	0	0	0	0	0	0
Adirondack Medical Center-Saranac Lake Site		0	0	95	0	0	0	0	0	0	0	0	0
Alice Hyde Medical Center		0	0	76	0	0	0	0	0	0	0	0	0
Champlain Valley Physicians Hospital Medical Center		333	0	0	0	0	0	0	0	0	0	0	0
Elizabethown Community Hospital		0	15	0	0	0	0	0	410	0	0	0	0
Glens Falls Hospital		0	0	0	0	0	0	0	0	0	0	0	0
Moses-Ludington Hospital		0	15	0	0	0	0	0	0	0	0	0	0
Nathan Littner Hospital		0	0	0	74	0	0	171	0	0	0	0	0
Saratoga Hospital		0	0	0	0	0	20	0	0	0	0	0	0
St. Mary's Healthcare		0	0	0	0	0	10	0	0	0	0	0	0
St. Mary's Healthcare - Amsterdam Memorial Campus		0	0	0	0	0	10	0	0	0	0	0	0
Total Nursing Home Beds		423	340	215	360	0	590	789	402	528	3057	71644	116300
Nursing Home Beds per 100,000 Population		516.2	867.8	417.1	652.4	0.0	1181.9	357.2	610.7	835.9	524.8	638.5	597.5
Nursing Home Beds per Facility		0	0	0	0	0	0	0	82	0	0	0	0
Adirondack Tfr-County Nursing and Rehabilitation Center, Inc		0	0	0	0	0	0	0	0	0	0	0	0
Alice Hyde Medical Center		0	0	0	0	0	120	0	0	0	0	0	0
Capstone Center for Rehabilitation and Nursing		0	0	0	0	0	0	0	0	0	0	0	0
Champlain Valley Physicians Hospital Medical Center SNF		54	0	0	0	0	0	0	0	0	0	0	0
Clinton County Nursing Home		80	0	0	0	0	0	0	0	0	0	0	0
Evergreen Valley Nursing Home		89	0	0	0	0	0	0	0	0	196	0	0
Fort Hudson Nursing Center, Inc.		0	0	0	0	0	0	0	0	0	0	0	0
Franklin County Nursing Home		0	0	80	0	0	0	0	0	0	0	0	0
Fulton Center for Rehabilitation and Healthcare		0	84	0	176	0	0	0	0	0	0	0	0
Heritage Commons Residential Health Care		0	0	0	0	0	0	0	0	0	0	0	0
Hence Nye Home		0	100	0	0	0	0	0	0	0	0	0	0
Indian River Rehabilitation and Nursing Center		0	0	0	0	0	0	0	0	0	122	0	0
Meadowbrook Healthcare		200	0	0	0	0	0	0	0	0	0	0	0
Mercy Living Center		0	0	30	0	0	0	0	0	0	0	0	0
Nathan Littner Hospital Nursing Home		0	0	0	84	0	0	0	0	0	0	0	0
Palatine Nursing Home		0	0	0	0	0	70	0	0	122	0	0	0
Pleasant Valley		0	0	0	0	0	120	0	0	0	0	0	0
River Ridge Living Center, LLC		0	0	0	0	0	0	36	0	0	0	0	0
Saratoga Care Nursing Home		0	0	0	0	0	0	277	0	0	0	0	0
Saratoga County Maplewood Manor		0	0	0	0	0	0	120	0	0	0	0	0
Schuyler Ridge A Residential Health Care Facility		0	0	0	0	0	0	0	0	0	0	0	0
St. Johnsville Rehabilitation and Nursing Center		0	0	0	0	0	120	0	0	0	88	0	0
The Orchard Nursing and Rehabilitation Center		0	0	0	0	0	0	0	120	0	0	0	0
The Pines at Glens Falls Center for Nursing & Rehabilitation		0	0	0	0	0	0	0	0	0	0	0	0
The Stanton Nursing and Rehabilitation Centre		0	0	0	0	0	0	0	0	0	0	0	0
Union Living Center		0	156	0	0	0	0	0	0	0	0	0	0
Wells Nursing Home Inc		0	0	0	100	0	0	0	0	0	0	0	0
Wesley Health Care Center Inc		0	0	0	0	0	0	356	0	0	0	0	0
Westmount Health Facility		0	0	0	0	0	0	0	80	0	0	0	0
Wilkinson Residential Health Care Facility		0	0	0	0	0	160	0	0	0	0	0	0

## HEALTH SYSTEM DATA

Adirondack Rural Health Network		County										ARRN Region	Update NYS (2)	New York State
Page 2 of 3		Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington		(1)		
<b>Total Adult Care Facility Beds</b>		150	113	64	134	0	144	306	240	102		1,109	31,502	41,137
Adult Care Facility Beds per 100,000 Population		183.0	288.4	124.1	242.8	0.0	288.5	138.5	364.6	161.3		190.4	280.8	211.3
Total Adult Home Beds		130	43	64	82	0	104	76	210	102		707	22,018	29,167
Total Assisted Living Beds		20	70	0	52	0	40	230	30	0		402	9,484	11,970
<b>Adult Home Beds by Total Capacity per Facility</b>														
Adirondack Manor HFA D.B.A. Adirondack Manor HFA (Essex)		0	40	0	0	0	0	0	0	0				
Adirondack Manor HFA D.B.A. Monticlin Manor HFA (Warren)		0	0	0	0	0	0	0	0	0				
Adirondack Manor Home for Adults (Clinton)		40	0	0	0	0	0	0	0	0				
Adirondack Manor Home for Adults (Franklin)		0	0	34	0	0	0	0	0	0				
Alana House		0	0	0	0	0	0	17	0	0				
Arkell Hall		0	0	0	0	0	24	0	0	0				
Beacon Home Memory Care Community		0	0	0	0	0	0	52	0	0				
Cambridge Guest Home		0	0	0	0	0	0	0	0	0				
Cook Adult Home		0	0	0	0	0	0	13	0	34				
Countryside Adult Home		0	0	0	0	0	0	0	48	0				
David & Helen Getman Memorial Home		0	0	0	20	0	0	0	0	0				
Emeritus at the Landing of Queensbury		0	0	0	0	0	0	0	88	0				
Hillcrest Spring Residential		0	0	0	0	0	80	0	0	0				
Holbrook's Adult Home, Inc.		0	0	0	0	0	0	0	0	33				
Home of the Good Shepherd at Highpointe		0	0	0	0	0	0	42	0	0				
Home of the Good Shepherd Wilton		0	0	0	0	0	0	86	0	0				
Keene Valley Neighborhood House		0	50	0	0	0	0	0	0	0				
Klores Ladington Adult Care Facility		0	23	0	0	0	0	0	0	0				
Pine Harbour		66	0	0	0	0	0	0	0	0				
Pineview Commons H.F.A.		0	0	0	0	0	0	0	0	0				
Pleasant Valley Adult Home Washington Co. Public Home		0	0	0	94	0	0	0	0	0				
Samuel F. Vilas Home		44	0	0	0	0	0	0	0	35				
Sarah Jane Sanford Home		0	0	0	0	0	40	0	0	0				
The Farm Home		0	0	30	0	0	0	0	0	0				
The Terrace at the Glen		0	0	0	0	0	0	0	0	44				
Willing Helpers' Home for Women		0	0	0	20	0	0	0	0	0				
Woodlawn Commons		0	0	0	0	0	0	42	0	0				
<b>Community Health Center (CHC) Usage, 2011</b>														
Estimated Number of CHC Patients		200	8581	895	15	1260	113	9576	23257	14211		57,995	699,129	1,489,141
Percentage of Population		0.24%	21.90%	1.74%	0.03%	26.29%	0.23%	4.34%	35.33%	22.50%		9.96%	6.23%	7.65%
<b>Health Professional Shortage Areas (HPSAs)</b>														
Number of Primary Care HPSAs		1	5	4	1	2	1	0	2	1		16	89	117
Primary Care HPSA Population Total		10,376	4,456	5,894	53,542	3,274	5,768	0	4,670	196		82,409	1,412,522	3,325,253
Number of Dental Care HPSAs		0	0	1	0	0	0	0	0	0		1	16	27
Dental Care HPSA Population Total		0	0	16,203	0	0	0	0	0	0		16,203	681,251	1,531,495
Number of Mental Health HPSAs		1	1	1	1	1	1	0	0	0		5	41	54
Mental Health HPSA Population Total		10,376	35,299	44,612	6,684	4,881	48,104	0	0	0		101,852	2,075,256	3,195,785

## HEALTH SYSTEM DATA

Adirondack Rural Health Network Page 3 of 3	Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington	ARIN Region (1)	Update NYS (2)	New York State
Physician Data												
Total Primary Care Full Time Equivalents (FTEs)	92.4	23.4	54.7	52.1	3.9	41.7	188.8	88.5	36.5	582.0	1217.5	2349.0
Primary Care FTEs per 100,000 Population	112.8	59.8	106.1	94.4	81.5	83.5	85.5	134.5	57.7	99.9	108.5	120.0
Family Medicine FTEs	31.2	18.2	19.5	22.1	3.9	19.5	104.2	32.6	22.1	273.4	3,373.5	5,033.6
General Internal Medicine FTEs	33.9	3.9	20.8	18.2	0.0	13.0	28.6	27.3	10.4	156.2	4,950.3	10,663.5
General Pediatrics FTEs	16.9	1.3	5.2	9.1	0.0	6.5	39.1	18.2	3.9	100.3	2,505.1	4,982.8
Obstetrics/Gynecology FTEs	10.4	0.0	9.1	2.6	0.0	2.6	16.9	10.4	0.0	52.1	1,343.7	2,669.1
Other Subspecialty FTEs												
Internal Medicine Subspecialties FTEs	26.0	1.3	7.8	5.2	0.0	20.8	41.7	31.2	0.0	134.1	4,463.3	9,243.0
General Surgery FTEs	3.9	1.3	6.5	5.2	0.0	1.3	9.1	7.8	0.0	35.2	890.6	1,617.1
Surgical Specialties FTEs	31.2	3.9	7.8	9.1	0.0	9.1	41.7	35.2	0.0	138.0	3,934.7	7,409.8
Psychiatry FTEs	20.8	0.0	7.8	5.2	0.0	3.9	43.0	14.3	3.9	99.0	2,908.7	6,954.1
Other Physician Subspecialty FTEs	76.8	9.1	28.6	9.1	1.3	18.2	52.1	82.0	1.3	278.6	9,672.7	19,137.0
Total Physician FTEs	251.3	39.1	113.3	85.9	5.2	95.0	376.3	259.1	41.7	1,266.9	34,042.5	67,710.0
Total Physician FTEs per 100,000 population	306.7	99.7	219.7	155.7	108.7	190.4	170.4	393.6	66.0	217.5	303.4	347.9

Licensee Data	County										ARIN Region (1)	Update NYS (2)	New York State
	Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington				
Clinical Laboratory Technician	23	11	2	4	0	4	30	12	7	89	1,273	1,850	
Clinical Laboratory Technologist	44	19	38	31	1	40	197	47	30	407	8,088	12,494	
Dental Assistant	8	2	5	3	0	3	22	6	8	54	993	1,039	
Dental Hygienist	45	16	16	24	4	28	211	55	32	403	7,440	9,215	
Dentist	39	17	24	18	0	25	162	47	14	321	8,979	15,108	
Dietitian/Nutritionist, Certified	17	7	12	5	1	6	81	18	5	146	3,030	4,519	
Licensed Clinical Social Worker ( R/P psychotherapy privileges)	41	26	24	24	4	23	244	64	29	456	13,621	23,112	
Licensed Master Social Worker (no privileges)	37	20	21	34	4	23	211	51	26	404	12,773	22,457	
Licensed Practical Nurse	374	238	341	284	12	339	456	370	459	3,077	50,012	64,600	
Physician	214	42	101	69	2	80	456	257	35	1,176	39,483	69,577	
Mental Health Counseling	44	15	20	6	0	9	77	14	7	183	2,799	4,682	
Midwife	6	1	3	3	0	0	6	11	4	34	535	887	
NPs, All	53	11	30	26	2	22	155	50	13	340	10,370	13,911	
Nurse Practitioner, Adult Health	15	0	8	6	0	1	33	7	1	70	3,120	4,091	
Nurse Practitioner, Community Health	1	0	0	0	0	0	0	0	0	1	54	54	
Nurse Practitioner, Family Health	22	6	18	12	1	14	64	28	5	156	3,811	5,002	
Nurse Practitioner, Gerontology	0	0	0	1	0	0	1	0	0	2	294	533	
Nurse Practitioner, Obstetrics & Gynecology	4	1	2	1	0	1	6	3	1	18	242	311	
Nurse Practitioner, Pediatrics	2	1	0	0	0	1	6	2	1	12	1,067	1,471	
Nurse Practitioner, Psychiatry	5	1	1	3	1	3	23	6	2	42	838	1,063	
Pharmacist	79	31	32	34	2	42	425	63	52	718	12,007	17,709	
Physical Therapist	54	40	33	16	1	33	315	61	29	549	10,812	15,611	
Physical Therapy Assistant	12	12	13	22	3	33	71	27	13	173	3,217	4,321	
Psychologist	9	17	5	7	3	7	97	32	6	176	5,550	10,157	
Registered Physician Assistant	30	28	22	18	4	16	137	73	16	328	5,907	8,920	
Registered Professional Nurse	1,168	448	675	612	63	689	3,280	995	664	7,905	153,254	212,813	
Respiratory Therapist	11	7	4	18	0	21	94	19	9	162	3,542	4,944	
Respiratory Therapy Technician	7	1	5	8	0	4	18	4	1	44	913	1,221	

(1) Excludes Montgomery County

(2) Excludes the following counties: Bronx, Kings, New York, Queens, Richmond

Sources:

Hospital, Nursing Home, and Adult Care Facility Beds: New York State Department of Health  
Community Health Center Patients: Robert Graham Center, UDS Mapper  
HPSAc: U.S. Department of Health and Human Services, Health Resources and Services Administration Data Warehouse, March, 2013  
Physician Data: Center for Health Workforce Studies, University at Albany School of Public Health

# Appendix: 14

## ARHN Community Assessment Educational Systems Profile

Revised: 5/20/2013

### ARHN COMMUNITY ASSESSMENT EDUCATIONAL SYSTEM PROFILE

Adirondack Rural Health Network												
Page 1 of 2												
Summary Primary-Secondary Education, 2010 - 2011												
Total Number Public School Districts (3)	Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington	ARHN Region (1)	Upstate NYS (2)	New York State
Total Pre-K Enrollment	8	11	7	349	26	251	5	12	9	71	739	897
Total K-12 Enrollment	194	151	352	8,531	519	7,360	34,975	479	123	274	49,100	71,602
Number Free Lunch	11,338	4,024	7,630	2,998	89	2,444	4,116	9,804	9,018	1,948	49,100	71,602
Number Reduced Lunch	3,290	1,158	2,797	2,998	519	7,360	34,975	479	123	274	49,100	71,602
Number Free and Reduced Lunch	973	488	887	845	56	557	1,585	2,180	2,180	6,458	11,133	11,133
Percent with Limited English Proficiency	37.0%	39.4%	46.2%	43.3%	26.6%	39.4%	16.1%	29.4%	38.2%	29.3%	31.6%	47.2%
Percent with Limited English Proficiency	14	2	14	19	0	154	132	28	23	252	65,092	210,567
Total Enrollment Base for Determining Graduation Rate	0.1%	0.0%	0.2%	0.2%	0.0%	2.0%	0.4%	0.3%	0.2%	0.3%	3.8%	7.6%
Number Went to Approved Equivalency Program	4,864	1,768	3,233	3,601	178	2,975	14,024	4,157	3,712	35,537	686,106	1,080,785
Number Dropped Out of High School	15	1	24	7	0	54	89	59	60	235	2,809	6,039
Percent Dropped Out of High School	100	24	71	139	0	95	130	66	66	611	11,638	29,226
Percent Dropped Out of High School	2.1%	1.4%	2.2%	3.9%	0.6%	3.2%	1.1%	1.6%	1.6%	1.7%	1.7%	2.7%
Total Number of Teachers	1,119	464	726	676	103	636	2,740	883	853	7,564	141,737	214,080
Student to Teacher Ratio	10.3	9.0	11.0	13.1	5.3	12.0	12.9	11.2	10.9	11.6	12.2	12.9
Summary Post Secondary Education, 2010 - 2011												
Licensed Practical Nursing Programs(4)	Clinton	Essex	Franklin	Fulton	Hamilton	Montgomery	Saratoga	Warren	Washington	ARHN Region (1)	Upstate NYS (2)	New York State
Licensed Practical Nursing Graduates/Completions (4)	1	83	0	0	0	(4)	0	(4)	(4)	4	47	52
Registered Nursing Programs	2	2	0	1	0	0	1	1	1	7	108	117
Registered Nursing New Graduates	78	58	0	0	40	0	0	0	78	254	6,187	8,462
Registered Nursing BSN Completions	23	0	0	0	0	0	0	12	0	35	1,266	1,701
Nursing Programs												
Registered Nursing Programs, 2010 - 2011												
Clinton County Community College BSN Completions	37	0	0	0	0	0	0	0	0	0	0	0
Clinton County Community College BSN Completions	0	0	0	0	0	0	0	0	0	0	0	0
SUNY Plattsburgh New Graduates	41	0	0	0	0	0	0	0	0	0	0	0
SUNY Plattsburgh BSN Completions	23	0	0	0	0	0	0	0	0	0	0	0
South County Community College New Graduates	0	58	0	0	0	0	0	0	0	0	0	0
South County Community College BSN Completions	0	0	0	0	0	0	0	0	0	0	0	0
Fulton-Montgomery Community College BSN Completions	0	0	0	0	40	0	0	0	0	0	0	0
Fulton-Montgomery Community College BSN Completions	0	0	0	0	0	0	0	0	0	0	0	0
Empire State College New Graduates	0	0	0	0	0	0	0	0	0	0	0	0
Empire State College BSN Completions	0	0	0	0	0	0	0	0	0	0	0	0
SUNY Adirondack New Graduates	0	0	0	0	0	0	0	12	78	0	0	0
SUNY Adirondack BSN Completions	0	0	0	0	0	0	0	0	0	0	0	0
Licensed Practical Nursing Programs, 2010 - 2011												
Clinton, Essex, Warren, Washington BOCES (29 total)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)
Hamilton, Fulton, Montgomery BOCES (20 total)		83										
South County Community College												
Washington, Saratoga, Warren, Hamilton, Essex BOCES (61 total)		(4)			(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)

- (1) Excludes Montgomery County
- (2) Excludes the following counties: Bronx, Kings, New York, Queens, Richmond
- (3) There are no Charter Schools in the ARHN region or Montgomery County and Private School data was not available
- (4) BOCES LPN programs span multiple counties within the ARHN region and Montgomery County

## School Districts

## EDUCATIONAL SYSTEM

Clinton	Essex	Franklin	Fulton	
Avonlea Valley	Crown Point	Brushton- Moira	Broadalbin- Perth	
Beekmantown	Elizabethtown-Lewis	Chateaugay	Gloversville	
Chazy Union Free	Keene	Malone	Johnstown	
Northeastern Clinton	Lake Placid	Salmon River	Mayfield	
Northern Adirondack	Minerva	Saranac Lake	Northville	
Peru	Moriah	St. Regis Falls	Oppenheim-Ephratah	
Plattsburgh	Newcomb	Tupper Lake	Wheelerville Union Free	
Saranac	Schacon Lake			
	Ticonderoga			
	Westport			
	Willshire			
Hamilton	Montgomery	Saratoga	Warren	Washington
Indian Lake	Amsterdam City	Ballston Spa	Holton	Argyle
Inlet Common	Catsajohane	Burnt Hills-Ballston Lake	Glens Falls City	Cambridge
Lake Pleasant	Fonda-Fultonville	Corinth	Glens Falls Common	Fort Ann
Long Lake	Fort Plain	Edinburg Common	Hadley-Luzerne	Fort Edward Union Free
Prairie Common	St. Johnsville	Galway	Johnsburg	Granville
Wells		Mechanicville	Lake George	Greenwich
		Saratoga Springs	North Warren	Hartford
		Schoyerville	Queensbury Union Free	Hudson Falls
		Shenendehowa	Warrensburg	Putnam
		South Glens Falls		Salem
		Stillwater		Whitehall
		Waterford-Halfmoon Union Free		

Sources: Primary and Secondary Education Data: New York State Education Department, School Report Card 2010 - 2011  
 LPN Graduation Data: National Center for Education Statistics, Integrated Postsecondary Education Data System (IPEDS)  
 RN Graduation Data: Center for Health Workforce Studies, University at Albany School of Public Health

## Appendix: 15

### Health Behavior, Health Outcomes and Health Status Data Elements Source Documentation

	Data Element	Data Source	Hyperlink
<b>Focus Area: Disparities</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage of Overall Premature Deaths (Ages 35 - 64), '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p1.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p1.htm</a>
2	Ratio of Black, Non-Hispanic Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p2.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p2.htm</a>
3	Ratio of Hispanic/Latino Premature Deaths (Ages 35 - 64) to White, Non-Hispanic Premature Deaths, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p3.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p3.htm</a>
4	Rate of Adult Age-Adjusted Preventable Hospitalizations per 100,000 Population (Ages 18 Plus), '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p4.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p4.htm</a>
5	Ratio of Black, Non-Hispanic Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p5.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p5.htm</a>
6	Ratio of Hispanic/Latino Adult Age-Adjusted Preventable Hospitalizations to White, Non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p6.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p6.htm</a>
7	Percentage of Adults (Ages 18 - 64) with Health Insurance, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p7.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p7.htm</a>
8	Percentage of Adults with Regular Health Care Provider, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p8.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p8.htm</a>
<b>Other Disparity Indicators</b>			
1	Rate of Total Deaths per 100,000 Population, '08 - 10	New York State Department of Health; Vital Statistics of New York State	<a href="http://www.health.ny.gov/statistics/chac/mortality/d32.htm">http://www.health.ny.gov/statistics/chac/mortality/d32.htm</a>
2	Rate of Total Deaths per 100,000 Adjusted Population, '08 - 10	New York State Department of Health; Vital Statistics of New York State	<a href="http://www.health.ny.gov/statistics/chac/mortality/d32.htm">http://www.health.ny.gov/statistics/chac/mortality/d32.htm</a>
3	Rate of Emergency Department Visits per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/ed/e2.htm">http://www.health.ny.gov/statistics/chac/ed/e2.htm</a>
4	Rate of Emergency Department Visits per 10,000 Adjusted Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/ed/e2.htm">http://www.health.ny.gov/statistics/chac/ed/e2.htm</a>
5	Rate of Total Hospital Discharges per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator	<a href="http://www.health.ny.gov/statistics/chac/hospital/h44.htm">http://www.health.ny.gov/statistics/chac/hospital/h44.htm</a>

		Reports	
6	Rate of Total Hospital Discharges per 10,000 Adjusted Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h44.htm">http://www.health.ny.gov/statistics/chac/hospital/h44.htm</a>
7	Percentage of Adults (18 and Older) Who Did Not Receive Care Due to Costs, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
8	% of Adults (18 and Older) with Poor Physical Health, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
9	% of Adults (18 and Older) with Physical Limitations, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
10	% of Adults (18 and Older) with Health Problems that Need Special Equipment, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
11	Percentage of Adults (18 and Older) with Disabilities, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
<b>Focus Area: Injuries, Violence, and Occupational Health</b>			
<b>Prevention Agenda Indicators</b>			
1	Rate of Hospitalizations due to Falls for Ages 65 Plus per 10,000 Population, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p9.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p9.htm</a>
2	Rate of ED Visits due to Falls for Children Ages 1 - 4 per 10,000 Population, Children Ages 1 - 4, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p10.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p10.htm</a>
3	Rate of Assault-Related Hospitalizations per 10,000 Population, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p11.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p11.htm</a>
4	Ratio of Black, Non-Hispanic Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p12.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p12.htm</a>
5	Ratio of Hispanic/Latino Assault-Related Hospitalizations to White, Non-Hispanic Assault Related Hospitalizations, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p13.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p13.htm</a>
6	Ratio of Assault-Related Hospitalizations for Low-Income versus non-Low Income Zip Codes, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p14.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p14.htm</a>
7	Rate of ED Occupational Injuries Among Working Adolescents Ages 15 - 19 per 10,000 Population Ages 15 - 19, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p15.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p15.htm</a>
<b>Other Indicators</b>			
1	Rate of Hospitalizations for Falls for Children	NYSDOH; New York State Community	<a href="http://www.health.ny.gov/statistics/chac/hospital/h25.htm">http://www.health.ny.gov/statistics/chac/hospital/h25.htm</a>



	Ages Under 10 per 10,000 Population, Children Ages Under 10 , '08 - 10	Health Indicator Reports	
2	Rate of Hospitalizations for Falls for Children Ages 10 - 14 per 10,000 Population, Children Ages 10 - 14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h26.htm">http://www.health.ny.gov/statistics/chac/hospital/h26.htm</a>
3	Rate of Hospitalizations for Falls for Individuals Ages 15 - 24 per 10,000 Individuals Ages 15 - 24, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h27.htm">http://www.health.ny.gov/statistics/chac/hospital/h27.htm</a>
4	Rate of Hospitalizations for Falls for Adults Ages 25 - 64 per 10,000 Adults Ages 25 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h28.htm">http://www.health.ny.gov/statistics/chac/hospital/h28.htm</a>
5	Rate of Violent Crimes per 100,000 Population, '07 - 11	NY State Division of Criminal Justice, 2011 Crime Statistics	<a href="http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm">http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm</a>
6	Rate of Property Crimes per 100,000 Population, '07 - 11	NY State Division of Criminal Justice, 2011 Crime Statistics	<a href="http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm">http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm</a>
7	Rate of Total Crimes per 100,000 Population, '07 - 11	NY State Division of Criminal Justice, 2011 Crime Statistics	<a href="http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm">http://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm</a>
8	Rate of Malignant Mesothelioma Cases, Ages 15 Plus, per 100,000 Population Ages 15 Plus, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g78.htm">http://www.health.ny.gov/statistics/chac/general/g78.htm</a>
9	Rate of Pneumonconsis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g79.htm">http://www.health.ny.gov/statistics/chac/general/g79.htm</a>
10	Rate of Asbestosis Hospitalizations, Ages 15 Plus, per 10,000 Population Ages 15 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g80.htm">http://www.health.ny.gov/statistics/chac/general/g80.htm</a>
11	Rate of Work-Related Hospitalizations, Employed Ages 16 Plus per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g81.htm">http://www.health.ny.gov/statistics/chac/general/g81.htm</a>
12	Rate of Elevated Blood Lead Levels Ages 16 Plus Employed per 10,000 Individuals Employed Ages 16 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g82.htm">http://www.health.ny.gov/statistics/chac/general/g82.htm</a>
13	Rate of Total Motor Vehicle Crashes per 100,000 Population, '09 - 11	Safe New York: Governor's Traffic Safety Committee	<a href="http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf">http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf</a>
14	Rate of Pedestrian-Related Accidents per 100,000 Population, '09 - 11	Safe New York: Governor's Traffic Safety Committee	<a href="http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf">http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf</a>
15	Rate of Speed-Related Accidents per 100,000 Population, '09 - 11	Safe New York: Governor's Traffic Safety Committee	<a href="http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf">http://www.safenyny.gov/11data/NYS09-11byCo_5Crash.pdf</a>
16	Rate of Motor Vehicle Accident Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d28.htm">http://www.health.ny.gov/statistics/chac/mortality/d28.htm</a>
17	Rate of TBI Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h33.htm">http://www.health.ny.gov/statistics/chac/hospital/h33.htm</a>
1	Rate of Unintentional	NYSDOH; New York	<a href="http://www.health.ny.gov/statistics/chac/hospital/h18.htm">http://www.health.ny.gov/statistics/chac/hospital/h18.htm</a>

8	Injury Hospitalizations per 10,000 Population, '08 - 10	State Community Health Indicator Reports	
19	Rate of Unintentional Injury Hospitalizations Ages 14 and Under per 10,000 Population Ages 14 and Under, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h20.htm">http://www.health.ny.gov/statistics/chac/hospital/h20.htm</a>
20	Rate of Unintentional Injury Hospitalizations Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h23.htm">http://www.health.ny.gov/statistics/chac/hospital/h23.htm</a>
21	Rate of Poisoning Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h32.htm">http://www.health.ny.gov/statistics/chac/hospital/h32.htm</a>
<b>Focus Area: Outdoor Air Quality</b>			
1	Number of Days with Unhealthy Ozone, 2007	County Health Rankings and Roadmaps	<a href="http://www.countyhealthrankings.org/rankings/data">http://www.countyhealthrankings.org/rankings/data</a>
2	Number of Days with Unhealthy Particulated Matter, 2007	County Health Rankings and Roadmaps	<a href="http://www.countyhealthrankings.org/rankings/data">http://www.countyhealthrankings.org/rankings/data</a>
<b>Focus Area: Built Environment</b>			
1	Percentage of the Population that Live in Jurisdictions that Adopted Climate Smart Communities Pledge, 2012	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p16.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p16.htm</a>
2	Percentage of Commuters Who Use Alternative Modes of Transportation to Work, '07 - 11	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p17.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p17.htm</a>
3	Percentage of Population with Low-Income and Low-Access to a Supermarket or Large Grocery Store, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p18.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p18.htm</a>
4	Percentage of Homes in Vulnerable Neighborhoods that have Fewer Asthma Triggers During Home Visits, '08 - 11	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p19.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p19.htm</a>
<b>Focus Area: Water Quality</b>			
1	Percentage of Residents Served by Community Water Systems with Optimally Fluoridated Water, 2012	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p20.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p20.htm</a>
<b>Focus Area: Reduce Obesity in Children and Adults</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage of Adults 18 and Older Who are Obese, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p21.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p21.htm</a>
2	Percentage of Public School Children Who are Obese, '10 - 12	New York State Department of Health; Indicators for Tracking	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p22.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p22.htm</a>

		Public Health Priority Areas 2013-2017	
<b>Other Indicators</b>			
1	Percentage of Total Students Overweight, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g63.htm">http://www.health.ny.gov/statistics/chac/general/g63.htm</a>
2	Percentage of Elementary Students Overweight, Not Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g66.htm">http://www.health.ny.gov/statistics/chac/general/g66.htm</a>
3	Percentage of Elementary Students Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g67.htm">http://www.health.ny.gov/statistics/chac/general/g67.htm</a>
4	Percentage of Middle and High School Students Overweight, Not Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g69.htm">http://www.health.ny.gov/statistics/chac/general/g69.htm</a>
5	Percentage of Middle and High School Students Obese	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g70.htm">http://www.health.ny.gov/statistics/chac/general/g70.htm</a>
6	Percentage of WIC Children Ages 2 - 4 Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g72.htm">http://www.health.ny.gov/statistics/chac/general/g72.htm</a>
7	Percentage of Age Adjusted Adults Overweight or Obese, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g74.htm">http://www.health.ny.gov/statistics/chac/general/g74.htm</a>
8	Percentage of Age Adjusted Adults Who Did Not Participate in Leisure Activities Last 30 Days, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g76.htm">http://www.health.ny.gov/statistics/chac/general/g76.htm</a>
9	Number of Recreational and Fitness Facilities per 100,000 Population, 2009	United States Department of Agriculture, Food Environment Atlas Data File	<a href="http://www.ers.usda.gov/data-products/food-environment-atlas/data-access-and-documentation-downloads.aspx">http://www.ers.usda.gov/data-products/food-environment-atlas/data-access-and-documentation-downloads.aspx</a>
10	Percentage of Age Adjusted Adults Eating Five or More Vegetables per Day, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g77.htm">http://www.health.ny.gov/statistics/chac/general/g77.htm</a>
11	Percentage of Age Adjusted Adults with Cholesterol Check within the Last Five Years, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g23.htm">http://www.health.ny.gov/statistics/chac/general/g23.htm</a>
12	Percentage of Age Adjusted Adults Ever Diagnosed with High Blood Pressure, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g24.htm">http://www.health.ny.gov/statistics/chac/general/g24.htm</a>
13	Percentage of Age Adjusted Adults with Physician Diagnoses Angina, Heart Attack, or Stroke, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g22.htm">http://www.health.ny.gov/statistics/chac/general/g22.htm</a>
14	Rate of Cardiovascular Disease Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d1.htm">http://www.health.ny.gov/statistics/chac/mortality/d1.htm</a>
15	Rate of Cardiovascular Premature Deaths (35 - 64) per 100,000 Population 35 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d2.htm">http://www.health.ny.gov/statistics/chac/mortality/d2.htm</a>
16	Rate of Pretransport	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d3.htm">http://www.health.ny.gov/statistics/chac/mortality/d3.htm</a>

6	Deaths per 100,000 Population, '08 - 10	State Community Health Indicator Reports	
1 7	Rate of Cardiovascular Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h1.htm">http://www.health.ny.gov/statistics/chac/hospital/h1.htm</a>
1 8	Rate of Diseases of the Heart Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d4.htm">http://www.health.ny.gov/statistics/chac/mortality/d4.htm</a>
1 9	Rate of Diseases of the Heart Premature Deaths (35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d5.htm">http://www.health.ny.gov/statistics/chac/mortality/d5.htm</a>
2 0	Rate of Disease of the Heart Transport Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d6.htm">http://www.health.ny.gov/statistics/chac/mortality/d6.htm</a>
2 1	Rate of Disease of the Heart Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h2.htm">http://www.health.ny.gov/statistics/chac/hospital/h2.htm</a>
2 2	Rate of Coronary Heart Diseases Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d7.htm">http://www.health.ny.gov/statistics/chac/mortality/d7.htm</a>
2 3	Rate of Coronary Heart Diseases Premature Deaths (35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d8.htm">http://www.health.ny.gov/statistics/chac/mortality/d8.htm</a>
2 4	Rate of Coronary Heart Disease Transport Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d9.htm">http://www.health.ny.gov/statistics/chac/mortality/d9.htm</a>
2 5	Rate of Coronary Heart Disease Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h3.htm">http://www.health.ny.gov/statistics/chac/hospital/h3.htm</a>
2 6	Rate of Congestive Heart Failure Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d10.htm">http://www.health.ny.gov/statistics/chac/mortality/d10.htm</a>
2 7	Rate of Congestive Heart Failure Premature Deaths (35 - 64) per 100,000 Population Ages 35 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d11.htm">http://www.health.ny.gov/statistics/chac/mortality/d11.htm</a>
2 8	Rate of Congestive Heart Failure Transport Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d12.htm">http://www.health.ny.gov/statistics/chac/mortality/d12.htm</a>
2 9	Rate of Congestive Heart Failure Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h4.htm">http://www.health.ny.gov/statistics/chac/hospital/h4.htm</a>
3 0	Rate of Cerebrovascular (Stroke) Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d13.htm">http://www.health.ny.gov/statistics/chac/mortality/d13.htm</a>
3 1	Rate of Cerebrovascular (Stroke) Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h5.htm">http://www.health.ny.gov/statistics/chac/hospital/h5.htm</a>
3 2	Rate of Hypertension Hospitalizations (18 Plus) per 100,000 Population 18 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h6.htm">http://www.health.ny.gov/statistics/chac/hospital/h6.htm</a>
3	Rate of Diabetes Deaths	NYSDOH; New York	<a href="http://www.health.ny.gov/statistics/chac/mortality/d22.htm">http://www.health.ny.gov/statistics/chac/mortality/d22.htm</a>

3	per 100,000 Population, '08 - 10	State Community Health Indicator Reports	
3 4	Rate of Diabetes Hospitalizations (Primary Diagnosis) per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h11.htm">http://www.health.ny.gov/statistics/chac/hospital/h11.htm</a>
3 5	Rate of Diabetes Hospitalizations (Any Diagnosis) per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h12.htm">http://www.health.ny.gov/statistics/chac/hospital/h12.htm</a>
<b>Focus Area: Reduce Illness, Disability, and Death Related to Tobacco Use and Secondhand Smoke Exposure</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage of Adults 18 and Older Who Smoke '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g108.htm">http://www.health.ny.gov/statistics/chac/general/g108.htm</a>
<b>Other Indicators</b>			
1	Rate of Chronic Lower Respiratory Disease Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d30.htm">http://www.health.ny.gov/statistics/chac/mortality/d30.htm</a>
2	Rate of Chronic Lower Respiratory Disease Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h34.htm">http://www.health.ny.gov/statistics/chac/hospital/h34.htm</a>
3	Rate of Asthma Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d31.htm">http://www.health.ny.gov/statistics/chac/mortality/d31.htm</a>
4	Rate of Asthma Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h35.htm">http://www.health.ny.gov/statistics/chac/hospital/h35.htm</a>
5	Rate of Asthma Hospitalizations, 25 - 44, per 10,000 Population Ages 25 - 44, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h41.htm">http://www.health.ny.gov/statistics/chac/hospital/h41.htm</a>
6	Rate of Asthma Hospitalizations, 45 - 64, per 10,000 Population Ages 45 - 64, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h42.htm">http://www.health.ny.gov/statistics/chac/hospital/h42.htm</a>
7	Rate of Asthma Hospitalizations, 65 Plus, per 10,000 Population Ages 65 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h43.htm">http://www.health.ny.gov/statistics/chac/hospital/h43.htm</a>
8	Percentage of Adults with Asthma, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g95.htm">http://www.health.ny.gov/statistics/chac/general/g95.htm</a>
9	Rate of Lung and Bronchus Deaths per 100,000 Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g8.htm">http://www.health.ny.gov/statistics/chac/general/g8.htm</a>
1 0	Rate of Lung and Bronchus Cases per 100,000 Population, '07-09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g7.htm">http://www.health.ny.gov/statistics/chac/general/g7.htm</a>
1 1	Number of Registered Tobacco Vendors per 100,000 Population, '09 - 10	NYSDOH; Tobacco Enforcement Program Annual Report	<a href="http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf">http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf</a>
1 2	Percentage of Vendors with Sales to Minors Violations, '09 - 10	NYSDOH; Tobacco Enforcement Program Annual Report	<a href="http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf">http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf</a>
1	Percentage of Vendors with Complaints, '09 - 10	NYSDOH; Tobacco Enforcement Program	<a href="http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf">http://www.health.ny.gov/prevention/tobacco_control/docs/tobacco_enforcement_annual_report_2009-2010.pdf</a>

3		Annual Report	
<b>Focus Area: Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage of Adults Ages 50 - 75 Who Received Colorectal Screenings Based on Recent Guidelines, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p24.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p24.htm</a>
2	Rate of Asthma ED Visits per 10,000 Population, '08 - '10	New York State Department of Health; Information on Asthma in New York State	<a href="http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed6.htm">http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed6.htm</a>
3	Rate of Asthma ED Visits Ages 0 - 4, per 10,000 Population Ages, 0 - 4, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p26.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p26.htm</a>
4	Rate of Short-term Diabetes Hospitalizations for Ages 6 - 17 per 10,000 Population, Ages 6 - 17, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p28.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p28.htm</a>
5	Rate of Short-term Diabetes Hospitalizations for Ages 18 Plus per 10,000 Population, Ages 18 Plus, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p29.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p29.htm</a>
6	Rate of Age Adjusted Heart Attack Hospitalizations per 10,000 Population, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p27.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p27.htm</a>
<b>Other Indicators</b>			
1	Rate of Asthma ED Visits for Ages 18 - 64 per 10,000 Population Ages 18 - 64, '08 - '10	New York State Department of Health; Information on Asthma in New York State	<a href="http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed5a.htm">http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed5a.htm</a>
2	Rate of Asthma ED Visits for Ages 65 Plus per 10,000 Population Ages 65 Plus, '08 - '10	New York State Department of Health; Information on Asthma in New York State	<a href="http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed5.htm">http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed5.htm</a>
3	Rate of All Cancer Cases per 100,000 Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g1.htm">http://www.health.ny.gov/statistics/chac/general/g1.htm</a>
4	Rate of all Cancer Deaths per 100,000 Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g2.htm">http://www.health.ny.gov/statistics/chac/general/g2.htm</a>
5	Rate of Female Breast Cancer Cases per 100,000 Female Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g9.htm">http://www.health.ny.gov/statistics/chac/general/g9.htm</a>
6	Rate of Female Late Stage Breast Cancer Cases per 100,000 Female Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g11.htm">http://www.health.ny.gov/statistics/chac/general/g11.htm</a>
7	Rate of Female Breast Cancer Deaths per 100,000 Female Population, '07	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g10.htm">http://www.health.ny.gov/statistics/chac/general/g10.htm</a>
8	Percentage of Women 40 Plus With Mammogram within Last Two Years, '08/ 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g21.htm">http://www.health.ny.gov/statistics/chac/general/g21.htm</a>
9	Rate of Cervix and Uteric	NYSDOH; New York	<a href="http://www.health.ny.gov/statistics/chac/general/g12.htm">http://www.health.ny.gov/statistics/chac/general/g12.htm</a>



	Cancer Cases per 100,000 Female Population, '07 - '09	State Community Health Indicator Reports	
10	Rate of Cervix and Uteric Cancer Deaths per 100,000 Female Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g13.htm">http://www.health.ny.gov/statistics/chac/general/g13.htm</a>
11	Percentage of Women 18 and Older with a Pap Smear within the Last Three Years, '08/ '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g20.htm">http://www.health.ny.gov/statistics/chac/general/g20.htm</a>
12	Rate of Ovarian Cancer Cases per 100,000 Female Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g14.htm">http://www.health.ny.gov/statistics/chac/general/g14.htm</a>
13	Rate of Ovarian Cancer Deaths per 100,000 Female Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g15.htm">http://www.health.ny.gov/statistics/chac/general/g15.htm</a>
14	Rate of Colon and Rectum Cancer Cases per 100,000 Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g5.htm">http://www.health.ny.gov/statistics/chac/general/g5.htm</a>
15	Rate of Colon and Rectum Cancer Deaths per 100,000 Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g6.htm">http://www.health.ny.gov/statistics/chac/general/g6.htm</a>
16	Percentage of Adults 50 Plus with Home Blood Stool Test within the Last Two Years, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
17	Percentage of Adults 50 Plus with Sigmoidoscopy or Colonoscopy within Last Ten Years, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
18	Rate of Prostate Cancer Deaths per 100,000 Male Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g17.htm">http://www.health.ny.gov/statistics/chac/general/g17.htm</a>
19	Rate of Prostate Cancer Cases per 100,000 Male Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g16.htm">http://www.health.ny.gov/statistics/chac/general/g16.htm</a>
20	Rate of Prostate Cancer Late Stage Cancer Cases per 100,000 Male Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g18.htm">http://www.health.ny.gov/statistics/chac/general/g18.htm</a>
21	Percentage of Males, 40 and Older with a Digital Rectal Exam within Last Two Years, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
22	Percentage of Males, 40 and Older with a Prostate Antigen Test within Last Two Years, '08/09	New York State Expanded Behavioral Risk Factor Surveillance System	<a href="http://www.health.ny.gov/statistics/brfss/expanded/2009/county/">http://www.health.ny.gov/statistics/brfss/expanded/2009/county/</a>
23	Rate of Melanoma Cancer Deaths per 100,000 Population, '07 - '09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g19.htm">http://www.health.ny.gov/statistics/chac/general/g19.htm</a>
24	Percentage of Medicaid Enrollees with at Least One Preventive Dental Visit within the Year, '08 - '10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g92.htm">http://www.health.ny.gov/statistics/chac/general/g92.htm</a>
25	Percentage of Age Adjusted Adults with a Dental Visit Within the Last Twelve Months, '08/09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g90.htm">http://www.health.ny.gov/statistics/chac/general/g90.htm</a>
2	Oral Cavity and Pharynx Cancer Deaths per	NYSDOH; New York State Community	<a href="http://www.health.ny.gov/statistics/chac/general/g4.htm">http://www.health.ny.gov/statistics/chac/general/g4.htm</a>

6	100,000 Population, '07-09	Health Indicator Reports	
2	Oral Cavity and Pharynx Cancer Deaths, Adults 45 - 74, per 100,000 Population, 45 - 74, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g94.htm">http://www.health.ny.gov/statistics/chac/general/g94.htm</a>
8	Oral Cavity and Pharynx Cancer Cases per 100,000 Population, '07 - 09	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g3.htm">http://www.health.ny.gov/statistics/chac/general/g3.htm</a>
<b>Focus Area: Maternal and Infant Health</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage Preterm Births < 37 Weeks of total births known gestation period, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b40.htm">http://www.health.ny.gov/statistics/chac/birth/b40.htm</a>
2	Ratio of Preterm Births (< 37 wks) Black/NH to White/NH, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p42.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p42.htm</a>
3	Ratio of Preterm Births (< 37 wks) Hisp/Latino to White/NH, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p43.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p43.htm</a>
4	Ratio of Preterm Births (< 37 wks) Medicaid to Non-Medicaid, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p44.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p44.htm</a>
5	Rate of Maternal Mortality per 100,000 Births, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b33.htm">http://www.health.ny.gov/statistics/chac/birth/b33.htm</a>
6	Percentage of Live birth Infants Exclusively Breastfed in Delivery Hospital, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b25.htm">http://www.health.ny.gov/statistics/chac/birth/b25.htm</a>
7	Ratio of Infants Exclusively Breastfed in Delivery Hospital Black, non-Hispanic to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p46.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p46.htm</a>
8	Ratio of Infants Exclusively Breastfed in Delivery Hospital Hispanic/Latino to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p47.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p47.htm</a>
9	Ratio of Infants Exclusively Breastfed in Delivery Hospital Medicaid to Non-Medicaid Births, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p48.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p48.htm</a>
<b>Other Indicators</b>			
1	Percentage Perterm Births < 32 weeks of total births known gestation period, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b38.htm">http://www.health.ny.gov/statistics/chac/birth/b38.htm</a>
2	Percentage Preterm Births 32 to < 37 Weeks of total births known gestation period, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b39.htm">http://www.health.ny.gov/statistics/chac/birth/b39.htm</a>
3	Percentage of Total Births with Weights Less Than 1,500 grams, '08 - 10	NYSDOH; New York State Community Health Indicator	<a href="http://www.health.ny.gov/statistics/chac/birth/b34.htm">http://www.health.ny.gov/statistics/chac/birth/b34.htm</a>



		Reports	
4	Percentage of Singleton Births with Weights Less Than 1,500 grams, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b35.htm">http://www.health.ny.gov/statistics/chac/birth/b35.htm</a>
5	Percentage of Total Births with Weights Less Than 2,500 grams, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b36.htm">http://www.health.ny.gov/statistics/chac/birth/b36.htm</a>
6	Percentage of Singleton Births with Weights Less Than 2,500 grams, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b37.htm">http://www.health.ny.gov/statistics/chac/birth/b37.htm</a>
7	Percentage of Total Births for Black, Non-Hispanic, with Weights Less than 2,500 Grams, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
8	Percentage of Total Births for Hispanic/Latino, with Weights Less than 2,500 Grams, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
9	Infant Mortality Rate per 1,000 Live Births, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b27.htm">http://www.health.ny.gov/statistics/chac/birth/b27.htm</a>
10	Infant Mortality Rate for Black, Non-Hispanic per 1,000 Births, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
11	Infant Mortality Rate for Hispanic/Latino per 1,000 Births, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
12	Rate of Deaths (28 Weeks Gestation to Seven Days) per 1,000 Live Births and Perinatal Deaths, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b32.htm">http://www.health.ny.gov/statistics/chac/birth/b32.htm</a>
13	Percentage Early Prenatal Care of Total Births Where Prenatal Care Status is Known, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b21.htm">http://www.health.ny.gov/statistics/chac/birth/b21.htm</a>
14	Percentage Early Prenatal Care for Black, Non-Hispanic, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
15	Percentage Early Prenatal Care for Hispanic/Latino, '08 - 10	NYSDOH; State and County Indicators for Tracking Public Health Priority Areas	<a href="http://www.health.ny.gov/statistics/community/minority/county/">http://www.health.ny.gov/statistics/community/minority/county/</a>
16	Percentage APGAR Scores of Less Than Five at Five Minute Mark of Births Where APGAR Score is Known, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b41.htm">http://www.health.ny.gov/statistics/chac/birth/b41.htm</a>
17	Rate of Newborn Drug Related Hospitalizations per 10,000 Births, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h46.htm">http://www.health.ny.gov/statistics/chac/hospital/h46.htm</a>
18	Percentage WIC Women Breastfed at Six months, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g62.htm">http://www.health.ny.gov/statistics/chac/general/g62.htm</a>
19	Percentage Infants Receiving Any Breast Milk in Delivery Hospital, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b24.htm">http://www.health.ny.gov/statistics/chac/birth/b24.htm</a>
<b>Focus Area: Preconception and Reproductive Health</b>			
<b>Prevention Agenda Indicators</b>			

1	Percent of Births within 24 months of Previous Pregnancy, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b1.htm">http://www.health.ny.gov/statistics/chac/birth/b1.htm</a>
2	Rate of Pregnancies Ages 15 - 17 year per 1,000 Females Ages 15-17, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b12.htm">http://www.health.ny.gov/statistics/chac/birth/b12.htm</a>
3	Ratio of Pregnancy Rates for Ages 15 - 17 Black, non-Hispanic to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p55.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p55.htm</a>
4	Ratio of Pregnancy Rates for Ages 15 - 17 Hispanic/Latino to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p56.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p56.htm</a>
5	Percent of Unintended Births to Total Births, 2011	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p57.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p57.htm</a>
6	Ratio of Unintended Births Black, non-Hispanic to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p58.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p58.htm</a>
7	Ratio of Unintended Births Hispanic/Latino to White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p59.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p59.htm</a>
8	Ratio of Unintended Births Medicaid to Non-Medicaid, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p60.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p60.htm</a>
9	Percentage of Women Ages 18- 64 with Health Insurance, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p61.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p61.htm</a>
<b>Other Indicators</b>			
1	Rate of Total Births per 1,000 Females Ages 15-44, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b5.htm">http://www.health.ny.gov/statistics/chac/birth/b5.htm</a>
2	Percent Multiple Births of Total Births, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b20.htm">http://www.health.ny.gov/statistics/chac/birth/b20.htm</a>
3	Percent C-Sections to Total Births, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b26.htm">http://www.health.ny.gov/statistics/chac/birth/b26.htm</a>
4	Rate of Total Pregnancies per 1,000 Females Ages 15-44, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b10.htm">http://www.health.ny.gov/statistics/chac/birth/b10.htm</a>
5	Rate of Births Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b6.htm">http://www.health.ny.gov/statistics/chac/birth/b6.htm</a>
6	Rate of Pregnancies Ages 10 - 14 per 1,000 Females Ages 10-14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b11.htm">http://www.health.ny.gov/statistics/chac/birth/b11.htm</a>
7	Rate of Births Ages 15 -	NYSDOH; New York	<a href="http://www.health.ny.gov/statistics/chac/birth/b7.htm">http://www.health.ny.gov/statistics/chac/birth/b7.htm</a>

	17 per 1,000 Females Ages 15-17, '08 - 10	State Community Health Indicator Reports	
8	Rate of Births Ages 15 - 19 per 1,000 Females Ages 15-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b8.htm">http://www.health.ny.gov/statistics/chac/birth/b8.htm</a>
9	Rate of Pregnancies Ages 15 - 19 per 1,000 Females Ages 5-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b13.htm">http://www.health.ny.gov/statistics/chac/birth/b13.htm</a>
10	Rate of Births Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b9.htm">http://www.health.ny.gov/statistics/chac/birth/b9.htm</a>
11	Rate of Pregnancies Ages 18 - 19 per 1,000 Females Ages 18-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b14.htm">http://www.health.ny.gov/statistics/chac/birth/b14.htm</a>
12	Percent Total Births to Women Ages 35 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b4.htm">http://www.health.ny.gov/statistics/chac/birth/b4.htm</a>
13	Rate of Abortions Ages 15 - 19 per 100 Live Births, Mothers Ages 15-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b15.htm">http://www.health.ny.gov/statistics/chac/birth/b15.htm</a>
14	Rate of Abortions All Ages per 100 Live Births to All Mothers, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/birth/b16.htm">http://www.health.ny.gov/statistics/chac/birth/b16.htm</a>
15	Percentage of WIC Women Pre-pregnancy Underweight, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g55.htm">http://www.health.ny.gov/statistics/chac/general/g55.htm</a>
16	Percentage of WIC Women Pre-pregnancy Overweight but not Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g56.htm">http://www.health.ny.gov/statistics/chac/general/g56.htm</a>
17	Percentage of WIC Women Pre-pregnancy Obese, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g57.htm">http://www.health.ny.gov/statistics/chac/general/g57.htm</a>
18	Percentage of WIC Women with Gestational Weight Gain Greater than Ideal, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g59.htm">http://www.health.ny.gov/statistics/chac/general/g59.htm</a>
19	Percentage of WIC Women with Gestational Diabetes, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g60.htm">http://www.health.ny.gov/statistics/chac/general/g60.htm</a>
20	Percentage of WIC Women with Gestational Hypertension, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g61.htm">http://www.health.ny.gov/statistics/chac/general/g61.htm</a>
<b>Focus Area: Child Health</b>			
<b>Prevention Agenda Indicators</b>			
1	Percentage of Children Ages 0 - 15 Months with Government Insurance with Recommended Well Visits, 2011	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p66.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p66.htm</a>
2	Percentage of Children Ages 3 - 6 Years with Government Insurance with Recommended Well Visits, 2011	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p67.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p67.htm</a>
3	Percentage of Children Ages 12 -21 Years with	New York State Department of Health;	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p68.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p68.htm</a>

	Government Insurance with Recommended Well Visits, 2011	Indicators for Tracking Public Health Priority Areas 2013-2017	
4	Percentage of Children Ages 0 -19 with Health Insurance, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p51.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p51.htm</a>
5	Percentage of 3rd Graders with Untreated Tooth Decay, '09 - 11	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p52.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p52.htm</a>
6	Ratio of 3rd Graders with Untreated Tooth Decay, Low Income Children to Non-Low income Children, '09 - 11	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p53.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p53.htm</a>
<b>Other Indicators</b>			
1	Rate of Children Deaths Ages 1 - 4 per 100,000 Children Ages 1 - 4, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d16.htm">http://www.health.ny.gov/statistics/chac/mortality/d16.htm</a>
2	Rate of Children Deaths Ages 5 - 9 per 100,000 Children Ages 5 - 9, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d17.htm">http://www.health.ny.gov/statistics/chac/mortality/d17.htm</a>
3	Rate of Children Deaths Ages 10 - 14 per 100,000 Children ages 10 - 14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d18.htm">http://www.health.ny.gov/statistics/chac/mortality/d18.htm</a>
4	Rate of Children Deaths Ages 5 - 14 per 100,000 Children Ages 5 - 14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d19.htm">http://www.health.ny.gov/statistics/chac/mortality/d19.htm</a>
5	Rate of Children Deaths Ages 5 - 19 per 100,000 Children Ages 15 - 19 , '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d20.htm">http://www.health.ny.gov/statistics/chac/mortality/d20.htm</a>
6	Rate of Children Deaths Ages 1 - 19 per 100,000 Children Ages 1 - 19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/indicators/cah.htm">http://www.health.ny.gov/statistics/chac/indicators/cah.htm</a>
7	Rate of Asthma Hospitalizations Children Ages 0 - 4 per 10,000 Population, Children Ages 0 - 4, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h36.htm">http://www.health.ny.gov/statistics/chac/hospital/h36.htm</a>
8	Rate of Asthma Hospitalizations Children Ages 5 - 14 per 10,000 Population, Children Ages 5 - 14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h37.htm">http://www.health.ny.gov/statistics/chac/hospital/h37.htm</a>
9	Rate of Asthma Hospitalizations Children Ages 0 - 17 per 10,000 Ages Children 0 - 17,	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h38.htm">http://www.health.ny.gov/statistics/chac/hospital/h38.htm</a>
10	Rate of Gastroenteritis Hospitalizations Children Ages 0 - 4 per 10,000 Population, Children Ages 0 - 4	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h7.htm">http://www.health.ny.gov/statistics/chac/hospital/h7.htm</a>
11	Rate of Otitis Media Hospitalizations Children Ages 0 - 4 per 10,000 Population, Children Ages 0 - 4	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h8.htm">http://www.health.ny.gov/statistics/chac/hospital/h8.htm</a>
12	Rate of Pneumonia Hospitalizations Children	NYSDOH; New York State Community	<a href="http://www.health.ny.gov/statistics/chac/hospital/h9.htm">http://www.health.ny.gov/statistics/chac/hospital/h9.htm</a>

	Ages 0 - 4 per 10,000 Population, Children Ages 0 - 4	Health Indicator Reports	
13	Rate of ED Asthma Visits Children Ages 0 - 4 per 10,000 Population, Children Ages 0 - 4 '08-'10	NYSDOH; Information on Asthma in New York State	<a href="http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed0.htm">http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed0.htm</a>
14	Percentage of Children Screened for Lead by Age 9 months	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g25.htm">http://www.health.ny.gov/statistics/chac/general/g25.htm</a>
15	Percentage of Children Screened for Lead by Age 18 months	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g26.htm">http://www.health.ny.gov/statistics/chac/general/g26.htm</a>
16	Percentage of Children Screened for Lead by Age 36 months (at least two screenings)	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g27.htm">http://www.health.ny.gov/statistics/chac/general/g27.htm</a>
17	Rate of Children Ages < 6 with Confirmed Blood Lead Levels $\geq$ 10 mg/dl Cases Per 1,000 Children Tested, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g28.htm">http://www.health.ny.gov/statistics/chac/general/g28.htm</a>
18	Rate of Unintentional Injury Hospitalizations for Children Under Age 10 per 10,000 Population, Children Under Age 10, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h19.htm">http://www.health.ny.gov/statistics/chac/hospital/h19.htm</a>
19	Rate of Unintentional Injury Hospitalizations for Children Ages 10 - 14 per 10,000 Population, Children Ages 10 - 14, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h20.htm">http://www.health.ny.gov/statistics/chac/hospital/h20.htm</a>
20	Rate of Unintentional Injury Hospitalizations for Children/Young Adults Ages 15 - 24 per 10,000 Ages 15 - 24, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h21.htm">http://www.health.ny.gov/statistics/chac/hospital/h21.htm</a>
21	Rate of Asthma ED Visits for Children Ages 0 - 17 per 10,000 Population, Children Ages 0 - 17, '07 - 09	New York State Department of Health; Information on Asthma in New York State	<a href="http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed2b.htm">http://www.health.ny.gov/statistics/ny_asthma/ed/asthmaed2b.htm</a>
22	Percentage of Medicaid Enrollees Ages 2 - 20 with at Least One Dental Visit, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g93.htm">http://www.health.ny.gov/statistics/chac/general/g93.htm</a>
23	Percentage of 3rd Graders with Dental Caries, '09 - 11	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g84.htm">http://www.health.ny.gov/statistics/chac/general/g84.htm</a>
24	Percentage of 3rd Graders with Dental Sealants, '09 - 11	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g86.htm">http://www.health.ny.gov/statistics/chac/general/g86.htm</a>
25	Percentage of 3rd Graders with Dental Insurance, '09 - 11	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g87.htm">http://www.health.ny.gov/statistics/chac/general/g87.htm</a>
26	Percentage of 3rd Graders with at Least One Dental Visit, '09 - 11	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g88.htm">http://www.health.ny.gov/statistics/chac/general/g88.htm</a>
27	Percentage of 3rd Graders Taking Fluoride Tablets Regularly, '09 - 11	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g89.htm">http://www.health.ny.gov/statistics/chac/general/g89.htm</a>

28	Rate of Caries ED Visits for Children Ages 3 - 5 per 10,000 Population, Children Ages 3 - 5, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/ed/e1.htm">http://www.health.ny.gov/statistics/chac/ed/e1.htm</a>
29	Percentage of WIC Children Ages 2 - 4 Viewing Two Hours TV or Less Per Day, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g73.htm">http://www.health.ny.gov/statistics/chac/general/g73.htm</a>
<b>Focus Area: Human Immunodeficiency Virus (HIV)</b>			
<b>Prevention Agenda Indicators</b>			
1	Rate of Newly Diagnosed HIV Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g43.htm">http://www.health.ny.gov/statistics/chac/general/g43.htm</a>
2	Ratio of Newly Diagnosed HIV Cases Black, non-Hispanic versus White, non-Hispanic, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p34.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p34.htm</a>
<b>Other Indicators</b>			
1	Rate of AIDS Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g44.htm">http://www.health.ny.gov/statistics/chac/general/g44.htm</a>
2	Rate of AIDS Deaths per 100,000 Adjusted Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d23.htm">http://www.health.ny.gov/statistics/chac/mortality/d23.htm</a>
<b>Focus Area: Sexually Transmitted Disease (STDs)</b>			
<b>Prevention Agenda Indicators</b>			
1	Rate of Primary and Secondary Syphilis for Males per 100,000 Male Population, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p39.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p39.htm</a>
2	Rate of Primary and Secondary Syphilis for Females per 100,000 Female Population, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p40.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p40.htm</a>
3	Rate of Gonorrhea Cases for Females Ages 15-44 per 100,000 Female Population Ages 15-44, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p36.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p36.htm</a>
4	Rate of Gonorrhea Cases for Males Ages 15 - 44 per 100,000 Male Population Ages 15-44, 2010	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p37.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p37.htm</a>
5	Rate of Chlamydia for Females Ages 15 - 44 per 100,000 Females Ages 15 - 44, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p38.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p38.htm</a>
<b>Other Indicators</b>			
1	Rate of Early Syphilis Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g45.htm">http://www.health.ny.gov/statistics/chac/general/g45.htm</a>
2	Rate of Gonorrhea Cases per 100,000 Population,	NYSDOH; New York State Community	<a href="http://www.health.ny.gov/statistics/chac/general/g46.htm">http://www.health.ny.gov/statistics/chac/general/g46.htm</a>

	'08 - 10	Health Indicator Reports	
3	Rate of Gonorrhea Ages 15 - 19 Cases per 100,000 Population Ages 15-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g47.htm">http://www.health.ny.gov/statistics/chac/general/g47.htm</a>
4	Rate of Chlamydia Cases All Males per 100,000 Male Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g48.htm">http://www.health.ny.gov/statistics/chac/general/g48.htm</a>
5	Rate of Chlamydia Cases Males Ages 15 - 19 Cases per 100,000 Male Population Ages 15-19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g49.htm">http://www.health.ny.gov/statistics/chac/general/g49.htm</a>
6	Rate of Chlamydia Cases Males Ages 20 - 24 per 100,000 Male Population Ages 20-24, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g50.htm">http://www.health.ny.gov/statistics/chac/general/g50.htm</a>
7	Rate of Chlamydia Cases All Females per 100,000 Female Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g51.htm">http://www.health.ny.gov/statistics/chac/general/g51.htm</a>
8	Rate of Chlamydia Cases Females Ages 15 - 19 per 100,000 Female Population Ages 15 - 19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g52.htm">http://www.health.ny.gov/statistics/chac/general/g52.htm</a>
9	Rate of Chlamydia Cases Females Ages 20 - 24 per 100,000 Female Population Ages 20-24, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g53.htm">http://www.health.ny.gov/statistics/chac/general/g53.htm</a>
10	Rate of PID Hospitalizations Females Ages 15 - 44 per 10,000 Female Population Ages 15 - 44, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h14.htm">http://www.health.ny.gov/statistics/chac/hospital/h14.htm</a>
<b>Focus Area: Vaccine Preventable Disease</b>			
<b>Prevention Agenda Indicators</b>			
1	Percent of Children Ages 19 - 35 months with 4:3:1:3:3:1:4, 2011	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p30.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p30.htm</a>
2	Percent females 13 - 17 with 3 dose HPV vaccine, 2011	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p31.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p31.htm</a>
3	Percent of Adults Ages 65 Plus With Flu Shots Within Last Year, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p32.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p32.htm</a>
<b>Other Indicators</b>			
1	Rate of Pertussis Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g30.htm">http://www.health.ny.gov/statistics/chac/general/g30.htm</a>
2	Rate of Pneumonia/flu Hospitalizations Ages 65 Plus per 100,000 Population Age 65 Plus, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h13.htm">http://www.health.ny.gov/statistics/chac/hospital/h13.htm</a>
3	Percent of Adults Ages 65 Plus Ever Received a	NYSDOH; New York State Community	<a href="http://www.health.ny.gov/statistics/chac/general/g42.htm">http://www.health.ny.gov/statistics/chac/general/g42.htm</a>



	Pneumonia Shot, '08/09	Health Indicator Reports	
4	Rate of Mumps Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g31.htm">http://www.health.ny.gov/statistics/chac/general/g31.htm</a>
5	Rate of Meningococcal Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g32.htm">http://www.health.ny.gov/statistics/chac/general/g32.htm</a>
6	Rate of H Influenza Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g33.htm">http://www.health.ny.gov/statistics/chac/general/g33.htm</a>
<b>Focus Area: Healthcare Associated Infections</b>			
<b>Prevention Agenda Indicators</b>			
1	Rate of Hospital Onset CDIs per 10,000 Patient Days, 2011*	NYSDOH Hospital Report on Hospital Acquired Infections	<a href="https://health.data.ny.gov/Health/Hospital-Acquired-Infections/utrt-zdsi">https://health.data.ny.gov/Health/Hospital-Acquired-Infections/utrt-zdsi</a>
2	Rate of Community Onset, Healthcare Facility Associated CDIs per 10,000 Patient Days, 2011*	NYSDOH Hospital Report on Hospital Acquired Infections	<a href="https://health.data.ny.gov/Health/Hospital-Acquired-Infections/utrt-zdsi">https://health.data.ny.gov/Health/Hospital-Acquired-Infections/utrt-zdsi</a>

(\*) *Caution should be taken when comparing Clostridium difficile rates due to differences in laboratory testing methods and patient risk factors between hospitals.*

<b>Focus Area: Prevent Substance Abuse and Other Mental, Emotional, and Behavioral Disorders</b>			
<b>Prevention Agenda Indicators</b>			
1	Percent of Adults Binge Drinking within the Last Month, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p64.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p64.htm</a>
2	Percent of Adults with Poor Mental Health (14 or More Days) in the Last Month, '08/09	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p63.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p63.htm</a>
3	Rate of Age Adjusted Suicides per 100,000 Adjusted Population, '08 - 10	New York State Department of Health; Indicators for Tracking Public Health Priority Areas 2013-2017	<a href="http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p65.htm">http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/indicators/2013/p65.htm</a>
<b>Other Indicators</b>			
1	Rate of Suicides for Ages 15 - 19 per 100,000 Population, Ages 15 - 19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d25.htm">http://www.health.ny.gov/statistics/chac/mortality/d25.htm</a>
2	Rate of Self-inflicted Hospitalizations 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h15.htm">http://www.health.ny.gov/statistics/chac/hospital/h15.htm</a>
3	Rate of Self-inflicted Hospitalizations for Ages 15 - 19 per 10,000 Population, Ages 15 - 19, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h16.htm">http://www.health.ny.gov/statistics/chac/hospital/h16.htm</a>
4	Rate of Cirrhosis Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/mortality/d21.htm">http://www.health.ny.gov/statistics/chac/mortality/d21.htm</a>
5	Rate of Cirrhosis	NYSDOH; New York	<a href="http://www.health.ny.gov/statistics/chac/hospital/h10.htm">http://www.health.ny.gov/statistics/chac/hospital/h10.htm</a>



	Hospitalizations per 10,000 Population, '08 - 10	State Community Health Indicator Reports	
6	Rate of Alcohol-Related Accidents per 100,000 Population, '09 - 11	Safe New York: Governor's Traffic Safety Committee	<a href="http://www.safeny.ny.gov/11data/NYS09-11byCo_5Crash.pdf">http://www.safeny.ny.gov/11data/NYS09-11byCo_5Crash.pdf</a>
7	Percentage of Alcohol-Related Crashes to Total Accidents, 09 - 11	Safe New York: Governor's Traffic Safety Committee	<a href="http://www.safeny.ny.gov/11data/NYS09-11byCo_5Crash.pdf">http://www.safeny.ny.gov/11data/NYS09-11byCo_5Crash.pdf</a>
8	Rate of Alcohol-Related Injuries and Deaths per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g107.htm">http://www.health.ny.gov/statistics/chac/general/g107.htm</a>
9	Rate of Drug-Related Hospitalizations per 10,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/hospital/h45.htm">http://www.health.ny.gov/statistics/chac/hospital/h45.htm</a>
10	Rate of People Served in Mental Health Outpatient Settings Ages 8 and Below per 100,000 Population, Ages 8 and Below, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
11	Rate of People Served in Mental Health Outpatient Settings Ages 9 - 17 per 100,000 Population, Ages 9 - 17, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
12	Rate of People Served in Mental Health Outpatient Settings Ages 18 - 64 per 100,000 Population, Ages 18 - 64, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
13	Rate of People Served in Mental Health Outpatient Settings Ages 65 Plus per 100,000 Population, Ages 65 Plus, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
14	Rate of People Served in ED for Mental Health Ages 8 and Below per 100,000 Population, Ages 8 and Below, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
15	Rate of People Served in ED for Mental Health Ages 9 - 17 per 100,000 Population, Ages 9 - 17, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
16	Rate of People Served in ED for Mental Health Ages 18 - 64 per 100,000 Population, Ages 18 - 64, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
17	Rate of People Served in ED for Mental Health Ages 65 Plus per 100,000 Population, Ages 65 Plus, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=gen-pop&amp;yearval=2011</a>
18	Percentage of Children Ages 9 - 17 with Serious Emotional Disturbances (SED) Served to Total SED Children Ages 9 - 17, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011</a>
19	Percentage of Adults Ages 18 - 64 with Serious Mental Illness (SMI) Served, 2011	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011</a>
20	Percentage of Adults Ages 65 Plus with Serious Mental Illness (SMI)	Office of Mental Health, PCS Planning Reports	<a href="http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011">http://bi.omh.ny.gov/pcs/Planning%20Report?pageval=pop-smi&amp;yearval=2011</a>

	Served, 2011		
<b>Other Non Preventive Agenda Indicators</b>			
1	Rate of Hepatitis A Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g34.htm">http://www.health.ny.gov/statistics/chac/general/g34.htm</a>
2	Rate of Acute Hepatitis B Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g35.htm">http://www.health.ny.gov/statistics/chac/general/g35.htm</a>
3	Rate of TB Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g36.htm">http://www.health.ny.gov/statistics/chac/general/g36.htm</a>
4	Rate of e. Coli 157 Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g37.htm">http://www.health.ny.gov/statistics/chac/general/g37.htm</a>
5	Rate of Salmonella Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g38.htm">http://www.health.ny.gov/statistics/chac/general/g38.htm</a>
6	Rate of Shigella Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g39.htm">http://www.health.ny.gov/statistics/chac/general/g39.htm</a>
7	Rate of Lyme Disease Cases per 100,000 Population, '08 - 10	NYSDOH; New York State Community Health Indicator Reports	<a href="http://www.health.ny.gov/statistics/chac/general/g40.htm">http://www.health.ny.gov/statistics/chac/general/g40.htm</a>
8	Rate of Confirmed Rabies Cases per 100,000 Population, '08 - 10	NYSDOH, Rabies Laboratory at Wadsworth	<a href="http://www.wadsworth.org/rabies/annualsum.htm">http://www.wadsworth.org/rabies/annualsum.htm</a>
9	Rate of Confirmed West Nile Virus Cases (Humans, Horses, Other Animals, Mosquito Pools) per 100,000 Population, '08 - 10	NYSDOH, West Nile Virus	<a href="http://www.health.ny.gov/diseases/west_nile_virus/update/">http://www.health.ny.gov/diseases/west_nile_virus/update/</a>

## References

"American Community Survey, 2007-2011." n.d.

Bureau, US Census. n.d.

Control, Centers for Disease. "State-specific smoking-attributable mortality and years of potential life lost." MMWR Weekly 23 January 2009: available at:  
<http://www.edc.gov/mmwr/preview/mmwrhtml/mm5802a2.htm>.

Data, SPARCS. n.d.

DS, Ludwig. "Childhood Obesity-The shape of things to come." New England Journal of Medicine (2007): 357:2325-2327.

El., Jia H and Lubetkin. "Trends in quality-adjusted life -years lost contributed to smoking and obesity." American Journal of Prevention Medicine (2010): 38 (2): 138-144.

Finder, American Fact. n.d.

Health, New York State Department of. NYSDOH Obesity Prevention Program Website. n.d.  
<<http://www.health.ny.gov/prevention/obesity>>.

J. Eccles & JA Gootman (Eds) Committee on Community-Level Programs for Youth, Board on Children, Youth and Families. Community Programs to Promote Youth Development. Washington D.C: National Academy Press, 2002.

LuAnn McCormick, Ph.D., Bradley Watts, Ph.D. Community Health Needs Accessment Process Data. Albany: Center for Human Services Research, University at Albany, 2011-2013.

Network, Adirondack Rural Health. Adirondack Rural Health Network Regional Survey Results. Regional Health Survey Results. Glens Falls: Adirondack Rural Health Network, 2013.

—. Adirondack Rural Health Network Survey Results: Washington County. Health Survey Results. Glens Falls: Adirondack Rural Health Network, 2013.

New York State Prevention Agenda 2013-2017. n.d.

Olshansky SJ, Passaro DJ, Hershow RC, et al. "A potential decline in life expectancy in the Unites States in the 21st century." New England Journal of Medicine (2005): 352:1138-1145.

Prevention, New York State Department of Health and. "Behaviror Risk Factor Surveillance System." Data Report. 2011.

RTI, International. New York Tobacco Control Program. Independant Evaluation Report . Research Triangle Park, NC: RTI International., 2011.

Services, U.S Department of Health and Human. "How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis of Smoking-Attributable Disease." A Report of the Surgeon General. 2010.

—. "Reducing the Consequences of Smoking: 25 Years of Progress." A Report of the Surgeon General. U.S Department of Health and Human Services. 1989.

SheaP, Shern D. "Primary Prevention in Behavioral Health: Investing in our Nation's Future." national Association of State Mental Health Program Directors (2011): Available at:  
[http://www.hhs.gov/ash/oah/news/assets/sts\\_primary\\_prevention\\_behavioral\\_health.pdf](http://www.hhs.gov/ash/oah/news/assets/sts_primary_prevention_behavioral_health.pdf).

Tracey Continelli, PhD and MPA, MPH Robert Martiniano. Community Assessment Needs Process Data. Rensselaer : Center for Health Workforce Studies, University at Albany School of Public Health, 2011-2013.

Trogon JF, Finkelstein EA, Geagan CW and Cohen JW. "State-and payer-specific estimates on annual medical expenditures attributable to obesity." Obesity (2012): 20(1):214-220.

Washington County Local Development Corporation. n.d. <<http://www.wcldc.org/aboutwc.html>>.